

# permission for undergraduate student to enroll in a graduate nursing course

Student: Please return this signed form to the Graduate Office, Cushing Hall 202H.  
Grad Office: Please return to Undergraduate Office for filing in student record.

Name: \_\_\_\_\_

Eagle ID: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Course Name & Number: \_\_\_\_\_ Semester: \_\_\_\_\_

## NOTES TO STUDENTS

- Graduate level courses do not have study days. All students in graduate courses are expected to attend classes scheduled on undergraduate study days.
- Graduate schools may not accept these courses for transfer credit if it is their policy not to allow credit for courses applied to other degrees.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## OTHER REQUIRED SIGNATURES

The above named student has permission to enroll in this course:

Student's Academic Advisor: \_\_\_\_\_

Faculty teaching the course: \_\_\_\_\_

Associate Dean, Undergraduate Program: \_\_\_\_\_