Request for a Course By Application

Submission of this completed form constitutes an enrollment form for a Course by Application. The course will appear on the record as the Course Number followed by a CA section.

Student Name: ____________________________  Student Identification No.: _____-____-_____

Term: ☐ Fall  ☐ Winter  ☐ Spring  ☐ Spring II  ☐ Summer I  ☐ Summer II  ☐ Year
Year: 20____

Course Number (include subject prefix): _________  Credits: ___

Course Title: ____________________________________________

Need for this Course: ____________________________________________

Approval Signatures:

CONSENTING INSTRUCTOR SIGNATURE                  DATE
The instructor certifies that, in his opinion, the student who completes this course by application will have met the requirements with the same grade as if he had taken the course of the same number as listed in the current catalog.

DEPARTMENT DIRECTOR                                 DATE
Does this course require extra compensation? ☐ Yes ☐ No  Note: Extra compensation is not paid during the academic year.

DEAN OF UNDERGRADUATE ACADEMICS (UNDERGRADUATES) / DEAN OF GRADUATE ACADEMICS (GRADUATES)         DATE