



Stevens Institute of Technology
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Special Student Study Plan

Name: _____

Social Security No.: ____ - ____ - _____

Department: _____

Major/Concentration: _____

Type of Special Student (check one):

- A student making up deficiencies in background.
- A student without a degree objective, who meets the same admissions standards as other graduate students.
- A student who is permitted to enroll in specific courses while his application for admission is considered.
- A conditionally admitted student fulfilling department acceptance conditions.

| Year | Term | Institution (if not Stevens) | Course Number | Course Name | Grade (if Rec'd) | Credits |
|------|------|------------------------------|---------------|-------------|------------------|---------|
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Courses taken by a student who is approved for transfer from SPECIAL to REGULAR status may or may not be credited to the degree. Determination is made on the following basis:

- A) The courses fit into an acceptable degree study plan approved by the student's advisor and,
- B) The courses are taken within the six year time limit for the award of the degree.

Number of courses for which you have previously enrolled: _____

The approval of your Department Director is required if the number is four or more.

 DEPARTMENT DIRECTOR DATE

 STUDENT SIGNATURE DATE

 STUDENT ADDRESS

 ADVISOR SIGNATURE DATE

 CITY, STATE ZIP CODE

 GRADUATE STUDIES DATE

 DAYTIME TELEPHONE NUMBER