REQUEST TO ELECT A YALE GRADUATE OR PROFESSIONAL SCHOOL COURSE

Office of the University Registrar, 246 Church Street, Third Floor, Phone: (203) 432-2331

All undergraduate students, including simultaneous degree students, must complete this form to request permission to enroll in a graduate or professional school course. You may not enroll under the graduate or professional school course number of a course multi-titled with an undergraduate course (e.g. CPSC 467/567) unless you have been admitted to the program for the simultaneous award of the bachelor’s and master’s degrees. For non-simultaneous degree students, all such courses must appear on the Yale College transcript with the undergraduate course number only. Undergraduates may not enroll in a graduate or professional school course designated as an independent study, nor may they apply credit earned in a graduate or professional school course to any of the Yale College distributional requirements. Regulations governing enrollment in graduate and professional school courses are published in Yale College Programs of Study. Please read these regulations carefully, and note that the deadlines of Yale College, including those regarding late work and work incomplete at the end of the term, apply to Yale College students enrolled in graduate and professional school courses.

ALL FIELDS MUST BE COMPLETED AND A SYLLABUS ATTACHED BEFORE SUBMISSION. INCOMPLETE FORMS WILL BE RETURNED.

Student’s Name: ___________________________ College: ______ Class: ______

Student ID #: ___________________________ Major(s): ___________________________

[ ] Check here if you are already admitted to the program for the simultaneous award of the bachelor’s and master’s degree.

Course subject and number: ___________________________ School: ___________________________

Course title: ___________________________ Instructor’s name: ___________________________

IN ORDER TO RECEIVE COURSE CREDIT, YOU MUST PROVIDE BELOW A DESCRIPTION OF THE GRADED WORK FOR THE COURSE (I.E., LENGTH OF PAPERS, TYPE & NUMBER OF EXAMS, CLASS PARTICIPATION, ETC.). ALSO, ATTACH A COPY OF THE COURSE SYLLABUS AND PROVIDE THE DATES REQUESTED BELOW. NOT ALL COURSES ARE AWARDED A FULL CREDIT.

Course Requirements summary: ___________________________

[ ] Check that syllabus is attached

Meeting day(s) and times (such as M 2:30-4:20): ___________________________

Dates of first and last class meetings: ___________________________

_________________________ __________________________
Student’s signature: Instructor’s signature: Date: Date:

Signature of DGS or Professional School Registrar: ___________________________ Date: ___________________________

PLEASE SUBMIT THIS FORM AND THE COURSE SYLLABUS TO YOUR RESIDENTIAL COLLEGE DEAN’S OFFICE BY THE DEADLINE OF FEBRUARY 8, 2012. LATE SUBMISSIONS WILL BE ASSESSED A FEE OF $50.00 FOR THE FIRST WEEK PLUS $5.00 PER DAY BEGINNING IN THE SECOND WEEK.

For Registrar’s Use only

# of Credits: ___________________________ Notes: ___________________________

Date: ___________________________ Signature of Deputy Registrar: ___________________________