

REQUEST FOR GRADUATE CREDIT FOR COURSES TAKEN
BY CLASS 5B & 5C STUDENTS

SEMESTER _____

Student's Name _____

Mailing Address _____

ID# _____ **G.P.A. _____

Courses* _____
(Only those approved for graduate credit and with grade of "B" [3.00] or better)

Signature of Instructor _____ (Date)

Signature of Chair of Dept. Offering Course _____ (Date)
(if different from above)

Signature of Student _____ (Date)

*Courses must be in addition to the requirements for undergraduate or professional degree.
May reserve up to 6 hours for thesis master's program, and 9 hours for non-thesis master's or doctoral program.
**Must have at least a 3.00 gpa over the last 60 hours of undergraduate work.
May request up to 6 hours for thesis master's program, and 9 hours for non-thesis master's or doctoral.
Form must be submitted and approved prior to registering for the course.

RETURN TO: GRADUATE SCHOOL – WSU – 324 FRENCH AD – PULLMAN, WA 99164-1030

Graduate School Approval: _____ (Date)