

REQUEST FOR GRADUATE CREDIT FOR COURSES TAKEN
BY A SENIOR
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)

Undergraduate Major _____ Graduate Major _____

Signature of Undergraduate Department _____ (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 the Bachelor's Degree.

**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)