Graduate Course Enrollment Request
for undergraduate enrollment in a Physics graduate course

Instructions:
Return completed request with a copy of your unofficial transcript to 368 LeConte.

Note to Physics Majors/Minors:
Graduate level courses cannot be used to satisfy major/minor upper division requirement in Physics.

First Name: ___________________ Last Name: ___________________ SID # ______________
Email: ____________________________ Check year: FR ___ SOPH ___ JR ___ SR ___
Your Major & Home Department: ________________________________________________

Semester: ___________ Year: _________

Physics Graduate Course: PHYSICS _______ Course Number: ________________
Secondary Section (DIS) if any: PHYSICS _______ Course Number: ________________

Course Prerequisites: __________________________________________________________

Have Completed Prerequisites: Yes____ No____

FOR DEPARTMENT ONLY:

__________________________________________ Date _____________________________

Physics Graduate Course instructor / Department Approval

Class Number: _______________ Dated Issued: _______________ By: __________________
Class Number (DIS):_______________ Dated Issued: _______________ By: _______________