

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:

Physics Graduate Course instructor / Department Approval *Date*

Class Number: _____ Dated Issued: _____ By: _____

Class Number (DIS): _____ Dated Issued: _____ By: _____