

Student Name:  
Student Number:  
Graduate Program:  
Degree:

Undergraduate Course Information

add  
drop  
audit

Subject:  
Course Number & Suffix:  
Undergrad Session:  
Section:  
Term:

Undergraduate Course Instructor Approval Signature:  
Undergraduate Department Approval Signature:

Date:  
Date:

Requirement for Graduate Degree:

yes  
no