Northern Illinois University
Undergraduate Student Request for Enrollment
In Graduate Level Course for Undergraduate Credit

_______________________________________             __________________________
Student Name                                                                                              Student ID number

_________     __________       ______       _____        _____________       _________   _______
Course Prefix    Course Number       Section          Hours           Registration Code            Term              Year

Will this course be used in the student’s program?            Yes _____ No ______

If yes, provide the following information:

For which requirement will this course be used?  RQ#___________________LN#_____________

If this course is being used as a substitute for another required course, what is the required course? ___________

NOTE: Major department approval is required for substitutions. This form will be accepted in lieu of the standard Substitution Form.

Pre-requisites
Completed 90 or more hours toward baccalaureate degree:            Yes _____ No _____
GPA of 3.00 or better or have previously completed a baccalaureate degree            Yes _____ No _____

Financial Aid Note

If a student is enrolled in courses that do not count toward his/her degree, the hours cannot be used to determine enrollment status for financial aid purposes. Therefore, you cannot be awarded aid for graduate classes that do not count toward your undergraduate degree.

Signatures

__________________________________________         _______________
Student                                                                                     Date

________________________________________________         _______________
Undergraduate Program Advisor                                   Date

________________________________________________         _______________
Major Department approval (if required)                      Date

________________________________________________        _________________
Major College approval                                     Date

________________________________________________   _________________
Graduate Faculty (Instructor of course)                       Date

Approved

________________________________________________   _________________
Graduate School        Date

Distribution:  Graduate School; Registration and Records; Financial Aid