

### Graduate Course Request Form

Name: \_\_\_\_\_  
Last First Middle Initial  
RUID: \_\_\_\_\_ **Official Rutgers Email ONLY:** \_\_\_\_\_

**Declared Graduation Date** (month/ year): \_\_\_\_\_ **Cumulative GPA:** \_\_\_\_\_

**Are you a member of the School of Arts and Sciences Honors Program?** Yes No

**Are you a member of the Honors College?** Yes No

**Semester and Year:** \_\_\_\_\_

School #	Subject #	Course #	Section #	Index #	Credits	Title

Reasons for seeking to take the course/s:

Please obtain signatures in the following order:

- 1) Instructor of Rutgers Graduate Course:

\_\_\_\_\_ Recommend approval  
(the student has shown that he/she has successfully completed prerequisites)

\_\_\_\_\_ Do not recommend approval

\_\_\_\_\_  
Name Signature Date

- 2) Director of Rutgers Graduate Program offering the course:

\_\_\_\_\_ Recommend approval

\_\_\_\_\_ Not approved

\_\_\_\_\_  
Name Signature Date

If a Special Permission number is needed, please be sure to obtain it from the department of program offering the course.

Special Permission # \_\_\_\_\_

If you have any difficulty registering with the Special Permission number, go to any SAS Advising Center for assistant.

Please submit this form to the Office of Advising and Academic Services.