

**Permission for Undergraduate Students (not Accelerated or Combined students)  
to Enroll in Graduate Course**

Name:	SBU ID Number - -	Current Phone number with area code ( ) -
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*If you have been accepted into a Master's program and take more than six graduate credits while you are an Undergraduate, only six graduate credits will count towards your graduate degree. There are no exceptions to this policy.*

*If you are in an Accelerated or Combined Bachelor's/Master's program this is not the correct form. You must use the Permission for Undergraduate Students in an Accelerated Degree Program to Enroll in Graduate Courses form for those requests.*

Course Information				
(circle one)	<b>Fall</b>	<b>Spring</b>	<b>Summer</b>	20_____
<b>Course 1</b>				
5 Digit Code, Dept & # (12345, PHY 500)		Course Title		
Credits		Instructor's Signature		
<b>Course 2</b>				
5 Digit Code, Dept & # (12345, PHY 500)		Course Title		
Credits		Instructor's Signature		

**Check one from below:**

- I have been accepted for graduate study at Stony Brook for the \_\_\_\_\_ semester of 20\_\_\_\_\_. I understand that up to 6 graduate credits may be applied to my graduate degree and that these credits will not be counted towards my undergraduate degree. I further understand that all graduate courses taken at Stony Brook will be used in the calculation of my graduate grade point average.  
**(A copy of the admission letter must be attached to this request for it to be processed.)**
- I am **not** enrolled in an accelerated degree program nor have I been accepted for graduate study at Stony Brook. I understand that graduate credits taken prior to earning my bachelor's degree **may not be applied toward a graduate degree at Stony Brook**. I understand that a maximum of **six graduate credits may be applied toward my undergraduate degree**.

Signature of Student \_\_\_\_\_ Date: \_\_\_\_\_

Graduate Program Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Graduate School Use Only:**

- Denied & Reason:** \_\_\_\_\_ **Date:** \_\_\_\_\_
- Approved:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*After approval, bring or email completed form to the Registrar's Office for final processing.*