

Permission for Undergraduate Students in an Accelerated or Combined Degree Program to Enroll in Graduate Course

Name:	SBU ID Number - -	Current Phone number with area code () -
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Accelerated/Combined Degree Program:	Did you declare your Accelerated/Combined program intent with the Registrar's Office? Yes _____ No _____
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***STUDENTS:** If you checked "NO" to the above question, please file a Major/Minor declaration form or bring your admissions offer letter to the Graduate School or SPD prior to submitting this enrollment form to the Registrar's Office. Make sure that your acceptance into the Accelerated/Combined program has been processed by confirming via SOLAR that the Service Indicator is on your record. Do not complete this form if the Service Indicator does not appear on your record.*

During their undergraduate career, students in Accelerated or Combined Bachelor's/Master's degree programs may only use a specified number of graduate credits and graduate courses towards the completion of their Master's degree. It is the student's responsibility to make sure s/he has registered for the appropriate # of credits. There are no exceptions to this policy.

DEADLINE: See Academic Calendar for enrollment deadlines.

Course Information

(circle one) **Fall Spring Summer** 20____

Course 1

5 Digit Code, Dept. & Number (ex: 12345, PHY500)	Course Title	Credits
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Course 2

5 Digit Code, Dept. & Number (ex: 12345, PHY500)	Course Title	Credits
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Course 3

5 Digit Code, Dept. & Number (ex: 12345, PHY500)	Course Title	Credits
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Course 4

5 Digit Code, Dept. & Number (ex: 12345, PHY500)	Course Title	Credits
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I am currently enrolled in an Accelerated or Combined Bachelor's/Master's degree program. I understand that all graduate courses taken at Stony Brook will be used in the calculation of my graduate grade point average. (Please Note: If you have not already declared your Accelerated or Combined Program, a copy of the admission letter into the program or a Major/Minor declaration form with appropriate signatures must be attached to this request for it to be processed.)

Signature of Student _____ **Date:** _____

Students in the _____ accelerated degree program may take up to _____ graduate credits towards their graduate degree during their undergraduate career. After completing the courses listed above this student will have taken _____ graduate credits towards their graduate degree. (This section must be filled out entirely or request will be disapproved).

Graduate Program Director _____ **Date:** _____

Undergraduate Program Director/Advisor _____ **Date:** _____

APPROVAL to OVERRIDE Class Limit if class is closed, Class Reserves, and/or Consent

Instructor or Departmental Signature _____ **Date:** _____

For Graduate School & School of Professional Development Use Only:

- Denied & Reason:** _____ **Date:** _____
- Approved:** _____ **Date:** _____

Graduate School: 2401 Computer Science Bldg.
 School of Professional Development: 2321 Computer Science Bldg.

It is the policy of the Graduate School & School of Professional Development to abide by University, Federal, and state laws. For more information on our policies, visit the Graduate Bulletin.
After approval, take or email completed form to the Registrar's Office for final processing.