



Office of the Registrar
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OFFICE USE ONLY	
Date Recorded:	_____
Recorder Initials:	_____

GRADUATE-UNDERGRADUATE COURSE AUTHORIZATION

- This form is required for an undergraduate student to register for a graduate-level course. Forms must be submitted to the Office of the Registrar.

Student Name: _____	Student ID: _____
Major(s): _____	Expected Graduation Date: _____

FIVE-YEAR PROGRAM STATUS
<input type="checkbox"/> I have been conditionally accepted into the Five-Year Program in (major): _____. I understand that as a Five-Year undergraduate student I may complete up to four graduate courses (12 credits). Of the 12 credits, six are applied to the undergraduate degree. Students must earn a minimum of 126 credits as an undergraduate to transfer six credits to their graduate program.
<input type="checkbox"/> I do not plan to apply to the Five-Year Program.

COURSE INFORMATION	
Semester: <input type="checkbox"/> Fall Semester (15 wk) <input type="checkbox"/> Fall Session I (7 wk) <input type="checkbox"/> Fall Session II (7 wk) <input type="checkbox"/> Spring Semester (15 wk) <input type="checkbox"/> Spring Session I (7 wk) <input type="checkbox"/> Spring Session II (7 wk) <input type="checkbox"/> Summer Semester (15 wk) <input type="checkbox"/> Summer Semester (10 wk) <input type="checkbox"/> Summer Session I (7 wk) <input type="checkbox"/> Summer Session II (7 wk)	
Course Code: _____	Course Section: _____
Course Title: _____	
Student Signature: _____	Date: _____

AUTHORIZATION SIGNATURES	
Undergraduate Faculty Advisor: _____	Date: _____
Graduate Program Director: _____	Date: _____