Office of the University Registrar
Student Union 1, Room 2101
4400 University Drive, MS 3D1
Fairfax, VA 22030
(703) 993-2441, Fax (703) 993-4668

GRADUATE COURSE FOR UNDERGRADUATE CREDIT

Student Name_____G#_____
Last First

Mason E-mail Address_____Daytime Phone _____

An undergraduate is granted permission to enroll in a graduate course (numbered 500 -699) to earn credit applicable to an undergraduate degree in accordance with the provision of the George Mason University Catalog.

Requested Term/Year: ☐ Spring ☐ Summer ☐ Fall _____
Year

CRN	Department	Course #	Section #	# of Credits

APPROVAL

Is the course closed? Yes or No

Departmental approval is required if this form can be treated as a force add.

_____ _____
Department Approval for closed course Date

_____ Date: _____
Course Instructor

_____ Date: _____
Chairperson of Department offering course

Note:

1. The Reserved Graduate Credit form is required for courses that should be held in reserve for a future graduate program.
2. This form must be submitted to the Office of the Registrar by the semester **Last Day to Add**.