

Office of Graduate Studies  
 Paul Loser Hall 109  
 609-771-2300 [graduate@tcnj.edu](mailto:graduate@tcnj.edu)

Request for Graduate Credit

ID (6-digit PAWS ID) \_\_\_\_\_  
 Name \_\_\_\_\_  
 Permanent Address \_\_\_\_\_  
 Campus Address \_\_\_\_\_  
 Major \_\_\_\_\_ Cum GPA \_\_\_\_\_ (3.0 or higher)  
 Units completed \_\_\_\_\_ (24 or more)

I understand that, with permission, I may take two graduate courses as an undergraduate (or three if I am in the Special Ed, Deaf Ed, Urban Ed, or English five year program\*) and am hereby requesting permission to enroll in the following graduate course(s) for graduate credit during the: (circle one) *spring/summer/fall* semester of (enter year) 20\_\_\_\_. Please note: Credit from this course may not be used toward more than one degree.

Course Code Authorized at Graduate Level	Course Title
_____	_____
_____	_____
_____	_____

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

I recommend approval of this request:

\_\_\_\_\_ Major Department Chairperson  
 Date \_\_\_\_\_

\_\_\_\_\_ Offering Department Chairperson  
 Date \_\_\_\_\_

Approved \_\_\_\_\_  
 \_\_\_\_\_  
 School Dean\*

\*Dean's signature not required in cases of 5 year programs, unless this registration will cause a student to be over load.  
 Submit form to Graduate Studies, Loser Hall 109.