GS6 - REQUEST FOR SENIOR ENROLLMENT IN GRADUATE COURSES

Date __________________________

Student Name ___________________________________________ SID __________________________

Local Address ____________________________________________

_________________________________________________________

I am a Clemson University senior requesting permission to enroll in courses for graduate credit during following academic session:

☐ Spring  ☐ I Summer  ☐ II Summer  ☐ Fall  ☐

My total load of course work will not exceed 18 semester hours for this session and the credits are to be used as indicated below.

☐ In lieu of one or more courses required for the baccalaureate degree.

(To be eligible for enrollment in this manner, the student must have a cumulative G.P.R. of at least 3.00 and the courses must be 700 and/or 800 level. These credits cannot be used for graduate degrees at Clemson and normally are not accepted by other graduate schools as transfer credits.)

List of the graduate course(s) ___________________________________________

☐ As graduate credits to possibly be used towards an advanced degree at Clemson or for transfer credits elsewhere.

(To be eligible for enrollment in this manner, the student must either have a cumulative G.P.R. of at least 3.00 or have been accepted conditionally by the Graduate School. In addition, all undergraduate degree requirements must be completed by the end of the above academic session unless approved otherwise and graduate credit may not be earned for 600 level courses that correspond to 200 or 400 level courses appearing on the undergraduate transcript.)

Number of credit hours yet to be completed for the bachelor's degree __________________________

List of graduate course(s) ___________________________________________

I acknowledge that this form is valid for one semester only and for the specific course(s) listed above.

________________________________________________________________________

__________________________  __________________________

Signature of Student  Cumulative Clemson G.P.R.

________________________________________________________________________

Approval ________________________________________________________________

Head of Department/Office/College

________________________________________________________________________

Approval ________________________________________________________________

Head of Department/Office/College

________________________________________________________________________

Approval ________________________________________________________________

Head of Graduate School

Return This Form to:
The Graduate School Admissions Office
Clemson University
E-106 Martin Hall
Box 345713
Clemson, SC 29634-5713
USA.

Form GS6
Rev. 0316