

**OFFICE OF GRADUATE ADMISSIONS  
 NORTH HALL WELCOME CENTER  
 SLIPPERY ROCK UNIVERSITY  
 SLIPPERY ROCK, PA 16057  
 (724) 738-2051**

**POST-BACCALAUREATE PERMISSION TO ENROLL IN COURSES FOR GRADUATE CREDIT**

**NOTE:** This form must be completed by all Post-Baccalaureate students wishing to receive graduate credit.

**Important:** Post-Baccalaureate students may not accumulate more than 6 semester hours of graduate credit. Graduate credits earned by Post-Baccalaureate students might not be acceptable towards a graduate degree. Questions concerning acceptability of credits should be directed to the Office of Graduate Admissions.

\_\_\_\_\_ Major \_\_\_\_\_ Total Hours Earned as Post-Bacc \_\_\_\_\_ Cumulative GPA \_\_\_\_\_

**The student listed above requests permission to take and receive graduate credit for the course(s) listed below:**

\_\_\_\_\_ Semester \_\_\_\_\_ Year \_\_\_\_\_

<u>Course</u>	<u>Dept.</u>	<u>Course #</u>	<u>Section #</u>	<u>CRN #</u>	<u>Credits</u>

**Justification:**

\_\_\_\_\_ Student Signature \_\_\_\_\_ Date \_\_\_\_\_ Approved: Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Approved: Dept. Graduate Coordinator \_\_\_\_\_ Date \_\_\_\_\_ Approved: Student's Academic Dean \_\_\_\_\_ Date \_\_\_\_\_

**Original to:** Academic Records & Registration, Room 107, Old Main

**Copies to:** Student's Dean  
 Office of Graduate Admissions  
 Academic Advisor  
 Student