OAKLAND UNIVERSITY™

School of Engineering and Computer Science
Academic Advising Office
255 Engineering Center
115 Library Drive
Rochester, MI 48309-4479

Request to Enroll in Graduate Course

Phone: 248-370-2201| Fax: 248-370-2084

www.oakland.edu/secs

Instructions
1. Complete all available fields below electronically.
2. Print and sign the form.
3. Obtain approval signatures from course Department Chair or Instructor.
4. Submit completed form to the SECS Advising Office, 255 EC. An email notification will be sent when the override has been processed.

Student G#: _____   **Last Name(s):** _____   **First Name(s):** _____

OU Email: _____   **Daytime Phone:** _____

Major: _____   **Second Major** (if applicable)**:** _____

I would like permission to enroll in the following graduate course:

Course (e.g. CSI 5130)	Course Title	What major requirement does this course satisfy?	Semester	Year

Reason for Request:

Student Signature: _____   **Date:** _____

THIS SECTION to be Completed by the Department Chair or Instructor of Graduate Course

Dept. Chair or Instructor Signature: _____   **Date:** _____

THIS SECTION to be Completed by the SECS Advising Office

Academic Adviser Signature: _____   **Date Override Processed:** _____

Petition of Exception required to use graduate course toward degree requirements: No   Yes   If Yes, Date Student Notified: _____

Revised: 8/11/17