

EMPORIA STATE  
UNIVERSITY  
Graduate School

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**REQUEST FOR GRADUATE CREDIT**

**Seniors (must have 90 hours or more) For Enrollment in Graduate Courses Numbered 500-799 only**

\_\_\_\_\_  
First Name Middle Name Last Name

Student ID \_\_\_\_\_, is hereby granted graduate credit for the term

\_\_\_\_\_ in the course(s):

\_\_\_\_\_  
Department Name Course No. & CRN No. Semester Hrs.

\_\_\_\_\_  
Department Name Course No. & CRN No. Semester Hrs.

\_\_\_\_\_  
Department Name Course No. & CRN No. Semester Hrs.

Approved By:

\_\_\_\_\_  
Advisor Date Instructor of Course Date

\_\_\_\_\_  
Graduate Dean Date Registrar Date

**Completed form must be submitted prior to enrollment.**