University of Arkansas
Out-of-Career Registration

Please see our website at http://grad.uark.edu for directions and explanations.

PLEASE NOTE: Registration MUST be processed before the last day to add the class.
This form does NOT override closed classes, time conflicts, instructor’s permission, or requisites.

IF ALL REQUIRED SECTIONS ARE NOT COMPLETE, FORMS WILL BE RETURNED.

*Student Name: ________________________________________ *Id Number: ____________
*Signature: ________________________________________ *E-Mail: ____________________________
(required)

Undergraduate Courses for Graduate Students: Return completed form to the Graduate School, OZAR 213
forms are available on our web-site: http://grad.uark.edu

* Department chair or graduate coordinator: (REQUIRED):

*Name: __________________________ *Signature: __________________________

PLEASE NOTE: GRADUATE TUITION IS APPLIED TO THE UNDERGRADUATE COURSES.
GRADUATE STUDENTS MUST FIRST REGISTER FOR ALL GRADUATE CLASSES BEFORE
THEIR OUT-OF-CAREER REGISTRATION CAN BE PROCESSED!

1. Graduate Student who wishes to enroll in undergraduate course/courses for undergraduate credit. Must have
signature of department chair or graduate coordinator. [Complete and return this form only.] Graduate
students taking undergraduate classes via the out-of-career registration form should be aware that those
classes do not count toward their minimum number of hours required to receive financial aid.

2. Graduate Student who wishes to enroll in a 3000-level course for graduate credit. [Please submit “Graduate
credit for 3000-level or 4000-level course” request form ONLY.]

3. Graduate Student who wishes to enroll in a 4000-level undergraduate-only course for graduate credit. [Please
submit “Graduate credit for 3000-level or 4000-level course” request form ONLY.]

4. Graduate Student who wishes to petition for retroactive graduate. [Please submit “Request for retroactive
graduate credit” form ONLY.]

Graduate Courses for Undergraduate Students: Return completed form to the Graduate School, OZAR 213

1. Undergraduate Student who wishes to enroll in graduate course/courses for undergraduate credit.
Please complete the following for each course(s).

*Course Title: __________________________ *Advisor: (REQUIRED)
*Instructor’s Name: __________________________ *Name: __________________________
*Instructor’s Signature: __________________________ *Advisor’s Signature: __________________________
*Course Title: __________________________ *Course Title: __________________________
*Instructor’s Name: __________________________ *Instructor’s Name: __________________________
*Instructor’s Signature: __________________________ *Instructor’s Signature: __________________________

Courses To Be Added
IF ALL REQUIRED SECTIONS ARE NOT COMPLETED, THIS FORM WILL NOT BE PROCESSED

<table>
<thead>
<tr>
<th>Term**</th>
<th>ISIS Class #</th>
<th>Subject &amp; Catalog #</th>
<th>Section</th>
<th>Hours</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example:(1103)</td>
<td>(1005)</td>
<td>(Math 5001)</td>
<td>(001)</td>
<td># of variable hrs</td>
<td>(U, G, L, A)</td>
</tr>
</tbody>
</table>

* required ** Use separate form for each different term

Revised: July, 2013