

Graduate School & International Education

Out-of-Career Registration

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

This form does **NOT** override closed classes, time conflicts, instructor's permission, or requisites. PLEASE NOTE: Registration MUST be processed before the last day to add the class. Incomplete Forms will be returned. *Student Name: _____ ID Number: _____ First Last *E-Mail: @uark.edu *Signature: *required **Undergraduate Courses for Graduate Students** Return completed form to the Graduate School, OZAR 213 or gradreg@uark.edu. *Student's department chair or graduate coordinator signature: (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! (Graduate students taking undergraduate classes via the out-of-career registration form should be aware that they will receive undergraduate credit only and that those classes do not count toward their minimum number of hours required to receive financial aid.) For **graduate credit** use one of the forms listed below *Graduate Student who wishes to enroll in a 3000-level or 4000 undergraduate only course for graduate credit: Please submit "Graduate Credit for 3000 or 4000 Level Course" form. **Graduate Student who wishes to petition for Retroactive Graduate Credit: Please submit "Request for Retroactive Graduate Credit" form. *Forms are available on our web-site: grad.uark.edu/graduate/current-students/forms.php **Graduate Courses for Undergraduate Students** Return completed form to the Graduate School, OZAR 213 or gradreg@uark.edu. 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

Term** Example Sp 2017	UA Connect Class # (1005)	Subject & Catalog # (Math 5001)	Section (001)	hours # of variable hrs	Location for <i>online classes</i> (What state will student be in while taking course)