

Office of the **Registrar** (413) 748-3530

Graduate Petition to Register for Over 18 Credits in a Semester

Student Name:		Student I.D.	:	
Current Address:		Current Phone:		
SC E				
Expected Date of Graduat	tion:			
I hereby petition for approval this semester:	to take the following graduate co	ourses, which make a total	of more than 18 hours in	
Course Number Course	<u>Γitle</u>	<u>S.H.</u>	Semester/Year	
Recommendation:				
Major Advisor		Da	Date	
Program Director/Dept. Chair			Date	
Approval:				

This form must contain all of the required approvals before being submitted to the Registrar's Office.

Assistant Vice President for Academic Affairs

Date