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: _____
Last First
*Signature: _____ *E-Mail:_____@uark.edu
***required**

Undergraduate Courses for <u>Graduate Students</u>: 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.**] **<u>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.</u>**
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

Term** Example:(1103)	**ISIS Class #** (1005)	**Subject & Catalog #** (Math 5001)	**Section** (001)	**Hours** # of variable hrs	**Level** (U, G, L, A)

**** required*** ***** Use separate form for each different term***

Revised: July, 2013