

*The University of North Carolina at Pembroke
School of Graduate Studies
Post Office Box 1510
Pembroke, NC 28372
(910) 521-6271*

Request for Undergraduate Student Enrollment in a Graduate Course Form
(Must be a UNCP student within 9 hours of graduation)

PLEASE PRINT

Name: _____ Date: _____

Address: _____ Banner ID: _____

City: _____ State: _____ Zip: _____

Home Telephone Number: _____ Cell Number: _____

Undergraduate Major: _____

Number of semester hours completed: _____ Cumulative GPA: _____

Number of semester hours needed to complete your undergraduate program: _____

Graduate course(s) in which you wish to enroll: _____

Term in which you wish to enroll in a graduate course(s): _____

The course(s) identified above are to be applied toward:

_____ Completion of a baccalaureate program

_____ A Master's Degree program (Graduate application must be submitted and
graduate tuition/fees paid)

_____ Approved _____ Denied _____

Undergraduate Advisor

_____ Approved _____ Denied _____

Undergraduate Major Department Chair

**Once the above required signatures are obtained, return the completed form to the School of Graduate Studies,
Lumbee Hall, Room 253.**

_____ Approved _____ Denied _____

Dean, School of Graduate Studies