

TUFTS UNIVERSITY
UNDERGRADUATE EDUCATION
PETITION TO TAKE AN EXTRA COURSE

THIS PETITION MAY NOT BE SUBMITTED UNTIL THE FIRST DAY OF CLASSES RETURN COMPLETED FORM TO UNDERGRADUATE EDUCATION IN DOWLING HALL 710.

NAME _____ LA _____ EN _____

ID _____ PHONE _____

MAJOR _____ Circle one: FR SO JR SR

Please read and sign: I am aware that the university requires eight semesters of full-time study to graduate. (See the *Tufts Bulletin* for full text of the policy.)

Student's signature

Date

If your petition is approved, you will logon to SIS to add the extra credits. Please allow two business days before attempting to add online. Courses that are full require permission from the instructor to complete the enrollment process.

List below all the classes that you would like to add in _____

Semester

Year

Department

Course Number

Course Title

Credit Value

Total Number of credits for this semester (including added courses) _____

Briefly state your reason for wanting to take the extra credit(s):

Signature of Advisor _____ Date _____ Approved _____ Not Approved _____

Signature of Advising Dean, Dowling Hall _____ Date _____ Approved _____ Not approved _____

Updated: 8-2016