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):
________________________________________________________________________________
________________________________________________________________________________

_________________________________________________Approved  ______ Not Approved ______
Signature of Advisor     Date
________________________________________________  Approved_______  Not approved_______
Signature of Advising Dean, Dowling Hall    Date

Updated: 8-2016