



College of Food, Agricultural, and Environmental Sciences

Petition to Receive Undergraduate Credit for Graduate-Level Course

Student Instructions: Obtain all signatures in the first portion and return to the Academic Programs Office (100 Ag. Administration Bldg. or cfaes-academics@osu.edu) for final approval to schedule the course.

STUDENT INFORMATION

Name _____
Last First Middle

Student ID Number _____ OSU email _____

Major _____ GPA* _____ Earned Hours _____ Honors : Yes No*

*If your cumulative GPA is below 3.3 and/or you are not in the Honors Program, you must attach a letter of support from your faculty advisor, dept coordinating advisor, and/or the course instructor.

COURSE INFORMATION

Academic Term _____ Dept Name and Catalog Number _____ Credit Hours _____

Class Number _____ Reason for taking course _____

I understand that I will NOT now be able to receive graduate credit for this course and that I will NOT be able to change the course to graduate credit status at any time in the future.

Student Signature _____ Date _____

Obtain the following signatures before submitting to CFAES Academic Affairs

DEGREE PROGRAM (Faculty/Departmental Advisor): Provide approval below.

Student meets the established criteria (Honors status and 3.3 cumulative GPA) and the undergraduate credit the student will earn will fulfill the following degree requirement (e.g. major course, GE, elective):

Student meets the established criteria (Honors status and 3.3 cumulative GPA) but the undergraduate credit the student will earn will NOT fulfill a degree requirement.

Student does NOT meet the established criteria (does not have Honors status and/or 3.3 cumulative GPA) but is requesting the Graduate School consider an exception, based on attached letter(s) of support.

Advisor Signature _____ Date _____ Ohio State e-mail address _____

INSTRUCTOR & GRADUATE STUDIES CHAIR: The student has permission to enroll in the course listed above.

Instructor Signature _____ Date _____ Ohio State e-mail address _____

Department Graduate Studies Chair Signature _____ Date _____ Ohio State e-mail address _____

CFAES ACADEMIC AFFAIRS: This petition is Approved Not approved

Assist Dean for Academic Affairs _____ Date _____ Ohio State email address _____

GRADUATE SCHOOL: This petition is Approved Not approved

Graduate School Representative _____ Date _____ Ohio State email address _____