

Graduate Course for Undergraduate Credit Approval Form

Last Name		First Name	Middle	USC ID Number
Class	Major Phone Number		Number	Email Address
	Course:	Course Title:		
	Class Number:	Units:	Fall/Spring Semeste	er:
Professor Ap	oproval:			
Professor Na	ame	Signati	ure	Date
Student's De	epartment Chair Approval	:		
Provide a sta	ntement regarding how this	course will be used toward	ds undergraduate credit:	
Chair Name		Signati	ure	Date

Once the form is signed by the professor and the chair, proceed to **Degree Progress (JHH 010)** for final processing. Then, proceed to the **Registration Building (REG)** and register for the class in person.