



COURSE REQUEST FORM

Effective Date: _____

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|-----------------------|--|-------------------------|----------------|----------|---------------|
| Student Number (500#) | Student Name (Last, First, Middle Initial) | School / Program / Plan | Major / Minor | Semester | Calendar Year |
| Email Address: | | | Local Phone #: | | Fall |
| | | | | | Spring |
| | | | | | Summer A |
| | | | | | Summer B |
| | | | | | Summer C |

| Approved Courses | | | | | | | | | | Approved Alternates | | | | | | | | | |
|------------------|-----------|---------|---------|--------------|-----|-------------|-------|--|------|---------------------|-----------|---------|---------|--------------|-----|-------------|-------|--|------|
| Subject | Catalog # | Section | Class # | # of Credits | G/U | Credit Only | Audit | Dean's/Instructor Signature to Authorize an Override | Date | Subject | Catalog # | Section | Class # | # of Credits | G/U | Credit Only | Audit | Dean's/Instructor Signature to Authorize an Override | Date |
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| FOR REGISTRATION ONLY | |
|-----------------------|-------|
| PROCESSED BY: | _____ |
| DATE PROCESSED: | _____ |
| EFFECTIVE DATE: | _____ |

Comments: _____

Honor Code Declaration Required of All Students:
 I hereby recognize that I am subject to and agree to abide by the University of Miami Student Honor Code, which provides standards that encourage ethical academic behavior and imposes penalties for violations of such standards. I understand that I am encouraged to read and understand the Honor Code which is contained in the Student Handbook.

Student Signature: _____

Advisor's Signature _____ Phone: _____ Date: _____

Dean's Signature _____ Date: _____

Note: Dean's signature required for credit overload, backdating, and exceptions within individual schools (use Comment box above for explanations)

Maximum Number of credits: _____