



**Request for Undergraduate Student Seeking Teacher Licensure  
to enroll in Graduate Courses**

*This form is to be used exclusively by student who have been admitted to FSU to pursue teacher licensure  
and whose licensure requirements specify graduate courses.*

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Middle Init** \_\_\_\_\_

**Banner Id:** \_\_\_\_\_ **Current Degree:** \_\_\_\_\_ **Major:** \_\_\_\_\_

**Semester:** Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer I \_\_\_\_\_ Summer II \_\_\_\_\_

**Course:** \_\_\_\_\_ **CRN** \_\_\_\_\_ **Course:** \_\_\_\_\_ **CRN** \_\_\_\_\_

**Course:** \_\_\_\_\_ **CRN** \_\_\_\_\_ **Course:** \_\_\_\_\_ **CRN** \_\_\_\_\_

**Course:** \_\_\_\_\_ **CRN** \_\_\_\_\_ **Course:** \_\_\_\_\_ **CRN** \_\_\_\_\_

**Justification:**

**Student Signature:** \_\_\_\_\_

**Program Chair Name:** \_\_\_\_\_

Print

**Program Chair Signature:** \_\_\_\_\_

08/2008