

MARQUETTE UNIVERSITY GRADUATE SCHOOL GRAD 6933: UNIVERSITY OF WISCONSIN-MILWAUKEE

Contact the Graduate School for assistance completing this form: 414-288-7137

Last Name:

First Name:

MUID:

Day Phone:

Program:

Degree:

Reason for taking UWM course:

NOTE: By signing this form you agree that you have read and understand all program requirements, which are available online at mu.edu/grad/inter-university-exchange.php. Generally, UWM courses run later than MU courses. Because of this lag, you should be aware that if you take a course at UWM during your final term, your graduation will most likely need to be delayed.

Student Signature:

Date:

GRADUATE SCHOOL PLANS

UWM Department:

Title of UWM Course:

Course #:

Section#

Credit Hours:

Term:

Fall

Spring

Summer

Year:

Course Start Date:

Course End Date:

Advisor/DGS Signature

Date:

FOR GRADUATE SCHOOL USE

Transcript Check

Graduate School Approval:

Date:

Scanned to OTR and Returned to Assistant Dean.

Initials:

Date: