

## REQUEST TO TAKE COURSE(S) IN OTHER GRADUATE SCHOOLS OF PACE UNIVERSITY

(Please attach course description.)

This form must be signed by both the law school's Associate Dean for Academic Affairs and the Dean of the other graduate school of Pace University.

Print Name:	U #:	
Phone #:		
Current Cumulative GPA:	Credits Earned:	
Credits Currently Registered for:	Credits Remaining:	
Expected Date of Graduation:		
Graduate course(s) to be taken at:		
Pace Graduate School:		
Semester:	Location:	_
Course Name:	# Credits: CRN #:	
List other approved graduate courses tal	ken outside the Law School and the credit re	eceived for each:
I understand that these credits may be a	pplied to my J.D. requirements and that not erred; grades do not affect the law school cur	<del>_</del>
Student's Signature:	Date:	
	chool Associate Dean for Academic Affairs	•••••
	Date:	
2) Approved: Signature of the Dea	an of Graduate School of Pace University	
	Date:	