

Name (Current Name on SB Records)	Student I.D. No. (<i>not S.S. #</i>) - -	Current Phone number with area code () -
Combined Degree Program	List graduate courses/credits taken prior to this semester (i.e. PHY 500, 3 credits)	
Did you declare your Combined Degree Program Intent with the Registrar's office? Yes ___ No ___	If you checked "No" please file a declaration prior to submitting requests. Form can be found at: http://www.sunysb.edu/registrar/forms.shtml	

During their Undergraduate career, students in Combined Bachelor's/Master's degree programs may only use a specified number of graduate credits and graduate courses towards the completion of their Master's degree. It is the student's responsibility to make sure s/he has registered for the appropriate # of credits. There are no exceptions to this policy.

Course Information

(circle one) **Fall** **Spring** **Summer** 20__

Course 1

Designator & Number (PHY 500, etc.)	Course Title	Credits
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Course 2

Designator & Number (PHY 500, etc.)	Course Title	Credits
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Course 3

Designator & Number (PHY 500, etc.)	Course Title	Credits
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Course 4

Designator & Number (PHY 500, etc.)	Course Title	Credits
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I am currently enrolled in a Combined Bachelor's/Master's degree program. I understand that all graduate courses taken at Stony Brook will be used in the calculation of my graduate grade point average. **(A copy of the admission letter must be attached to this request for it to be processed.)**

Signature of Student _____ **Date:** _____

Students in the _____ combined degree program may take up to _____ graduate credits towards their graduate degree during their undergraduate career. After completing the courses listed above this student will have taken _____ graduate credits towards their graduate degree. **(This section must be filled out entirely or request will be disapproved).**

Graduate Program Director _____ **Date:** _____

Bring completed form to the Graduate School (2401 Computer Science Building) for approval by appointment only.

Please Note: It is recommended that appointments are made one week in advance. Appointments must be completed **BEFORE the first day of classes for the intended semester of study. **Late requests will be denied.** Once the form has been approved, the student must take it to the Registrar's office for processing.*

- Disapproved**
 Approved

Date Received

Date: _____