



JD Request to enroll for Elective Credits at another MSU Graduate School

MSU College of Law ♦ Office of the Registrar ♦ 648 N. Shaw Lane, Rm. 309, East Lansing, MI 48824

Phone Number: 517-432-6820 ♦ Fax Number: 517-432-6821 ♦ Email: regist@law.msu.edu

Last Name First Name Middle Initial PID Number

has been granted permission to attend the MSU graduate school listed below as a guest student for the
(circle one): Summer / Fall / Spring 20____ term.

Upon successfully completing the course(s), the student will receive academic credit at MSU College of Law.

MSU Graduate School: _____

Permission has been granted to enroll in the following course(s):

1.) Course Name _____

Course Number _____ Section Number _____ Credits _____

2.) Course Name _____

Course Number _____ Section Number _____ Credits _____

3.) Course Name _____

Course Number _____ Section Number _____ Credits _____

4.) Course Name _____

Course Number _____ Section Number _____ Credits _____

A student who has a cumulative grade point average of at least 3.0 and has successfully completed twenty-nine (29) credits at the Law College may take up to six (6) hours of elective credits in professionally related graduate level courses at other colleges at Michigan State University. Grades from these courses of "C" or above will be accepted for transfer credit. Grades below "C" will not be transferred or recorded. These courses will count toward the maximum of five (5) total hours of Credit/No Credit grading option under the rules of Law College.

The Family Educational Rights & Privacy Act of 1974 does not permit MSU College of Law to request official student transcripts. It is the responsibility of the student to ensure that an official transcript from the MSU Registrar is sent to the Law College Registrar's Office at the completion of each course. Credits earned at other graduate schools as approved on this form will be counted toward fulfillment of the student's graduation requirement **only after an official transcript is received by the Law College Registrar's Office.**

Student's Signature: _____ Date: _____

Associate Dean for Academic Affairs Signature: _____ Date: _____

It is the responsibility of the student to present this completed form to the MSU College of Law Registrar's Office.

Original to Registrar
cc: Assoc. Dean for Student Affairs
cc: Student Copy