

MASTER'S OPTION COURSE ENROLLMENT

This form is for initial enrollment in a master's option course. The university requires continuous enrollment each long semester, with a grade of "In Progress" (IP) to be assigned each semester until completion. All students who receive an IP grade at the end of a semester will be automatically enrolled in 3 hours of the same master's option course for the following long semester. Automatic enrollment for master's option course will not be processed for summer semesters, or when an encumbrance exists that prevents registration. Students who wish to register for summer master's option coursework should notify the Office of Academic Records at Records@uhcl.edu during the registration period.

- Step 1: Instructor and Student must complete the information below and sign; Instructor will forward to Associate Dean's Office for final approval.
- Step 2: The Associate Dean's office submits the completed form with all signatures to the Office of Academic Records during registration via email at records@uhcl.edu or via fax at 281-283-2530.
- Step 3: The Office of Academic Records will notify the Associate Dean's office once official enrollment has been processed and completed and send them the completed form via email for their records.
- Step 4: The Associate Dean's office should notify the student regarding their official enrollment and of payment deadline.

AUTHORIZATION FOR MASTER'S OPTION ENROLLMENT

Last Name (Print) First Middle Student ID number

STUDENT SIGNATURE (REQUIRED) **DATE** **PHONE NUMBER**

My signature indicates my authorization to be automatically enrolled in the same master's option course each fall and spring semester until a final grade is awarded. I understand it is my responsibility to pay all tuition and fees before the fee payment deadline for Open Registration.

SEMESTER: Fall _____ Spring _____ Summer _____

COURSEWORK: Thesis Project Internship Residency

Comprehensive Exam Extended Coursework Practicum

SUBJECT **COURSE #**

INSTRUCTOR: _____
Last Name (Print) ID number

Signature Date

ASSOCIATE DEAN: _____
Signature Date

Records Office Use Only:

Class #: _____ Processed By: _____ Date: _____