

# UNIVERSITY OF FLORIDA COLLEGE OF LAW

## GRADUATE COURSE OPTION PETITION

**NAME:** \_\_\_\_\_ **UFID:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**SEM/YEAR ENTERED LAW SCHOOL:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

*\* Joint degree students and students on probation are not eligible for graduate course option. Transfer/transient students who have received more than 23 credit hours for work at another law school may not be eligible for graduate course option.*

**Working Policy for Graduate Course Option:** With approval, students may enroll in a maximum of **two** courses for up to **six** credits in the University of Florida Graduate School or in foreign language courses for credit toward law school graduation. Both courses may be taken in the same semester. The grade is not computed in a student's grade point average, but a **"B"** or higher must be earned to receive credit hours for the course. Independent study and directed research courses are not allowed. Foreign language courses do not have to be at the graduate level. No foreign language course may be approved unless it is a new language for the student or is advanced beyond courses in the language the student has previously taken. No foreign language course will be approved for a student who is proficient in the language. Approval to take a language course is conditional on placement as determined by the department offering the course. Transient/transfer students who receive more than 23 hours for work at another law school may not be eligible for the graduate course option. Joint degree students and students on probation are not eligible for the graduate course option. Students may take courses specified in the Graduate Course Option only if the student, through the exercise of due diligence, cannot take a course containing substantially the same subject matter at the Levin College of Law.

Please list the course(s) you want to take by course name and section number, indicate credit hours, attach a catalog description and syllabus, and give professor's name and telephone number. Please indicate what other graduate courses you have taken, if any. Briefly explain how this proposed course helps you meet your educational or professional goals.

TERM	COURSE PREFIX/NUMBER	SECTION #	COURSE NAME	CREDITS
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**EXPLANATION:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*Continue on back if needed*

I understand that I can not assume my request has been approved, and I am responsible for checking to see what action has been taken on this petition. If approved, I am responsible for the registration of the approved course(s).

**STUDENT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Office use only			
APPROVED _____	DENIED _____	BY _____	DATE _____
STUDENT NOTIFIED OF DECISION _____	BY _____	DATE _____	
SASS FILE UPDATED _____	BY _____	DATE _____	