



Undergraduate/Graduate Petition to Double-Count Courses

This form can be filled out with Adobe Acrobat and then printed for signatures. Upon completion, this form should be returned to Texas A&M University, Office of the Registrar, Degree Audit, P.O. Box 30018 College Station, TX 77842-3018; sent via campus mail to MS 0100; sent to degree-audit@tamu.edu via Filex; or faxed to 979-845-0727. Any questions may be directed to 979-845-0727 or degree-audit@tamu.edu.

Name: _____

Student ID Number: _____

Program Code: _____

Expected Graduation Term: _____

Courses to be Double-Counted Toward Graduate AND Undergraduate Credentials
(Approved Combination Programs)

CRN or Course	Term
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Courses to be Counted Toward Graduate Credentials

CRN or Course	Term
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Courses to be Counted Toward Undergraduate Credentials

CRN or Course	Term
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Graduate Program Director/Graduate Advisor Printed Name

Undergraduate Advisor Printed Name

Graduate Program Director/Graduate Advisor Signature

Undergraduate Advisor Signature

Date

Date