



Class Permission Slip: Psy 3800, Research Practicum

When you have obtained your faculty supervisor's signature, submit this form to the Office of the Registrar, 212 Behmler Hall.

Please print legibly. The form is not complete until the requested signature is obtained.

ID Number	Student Name <i>(last, first, mi)</i>		
Term: <input type="checkbox"/> Fall <input type="checkbox"/> Spring Year: 20____			
Psy 3800 is offered for 1-6 credits per term. A maximum of 12 credits may be applied to the Bachelor of Arts degree. Credits (1-6): _____ (S-N grading only)	Faculty Supervisor: _____ <small>please print clearly</small> Faculty Signature: _____		

For office use

Section # _____	Class # _____
Processed by: _____	Date: _____