

# Texas Woman's University

Office of the Registrar  
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Doc Type: <u>PE</u>
Desc: _____

## PROOF OF ELIGIBILITY FORM

Semester and year: \_\_\_\_\_ / \_\_\_\_\_

This is to certify that \_\_\_\_\_, ID# \_\_\_\_\_, is in the final semester of their undergraduate degree, within 12 hours of graduation, and has filed their Degree Plan Verification Form with the Registrar's Office. The following courses will be used to earn graduate credit; no undergraduate credit will be granted, and the student will not exceed a total of 16 semester credit hours during this term. **The student has submitted a valid graduate school application and application fee to the Office of Admissions Processing.**

\*NOTE: Post baccalaureate status qualifies students to take undergraduate-level courses only.

Department	Course Number	Section Number	Course Title

All signatures below must be obtained prior to submitting this form to the Registrar's Office for processing.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Advisor (Undergraduate)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Director, Chair, or Dean (Graduate Program)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Processed by Registrar's Office

\_\_\_\_\_  
Date