

DEPARTMENT OF SPANISH AND PORTUGUESE  
UNIVERSITY OF CALIFORNIA, IRVINE

**COURSE APPROVAL**

**To the student:** This form is to remain in your file in the Department office. Please complete it and submit it to your Academic Advisor for her/his approval and signature before you enroll in your classes (If your academic advisor is not available, obtain the signature of the Graduate Studies Director). Return this form to the GRADUATE COORDINATOR for processing.

***A hold will be placed on your registration until this form is returned.*** This hold will still allow you to register for your classes. However, it must be removed prior to the last TELE regular registration date or you will be dropped from your classes. It is the student responsibility to ensure that this form is completed and returned to the Graduate Coordinator to clear your record.

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Student's ID #

FOR THE FOLLOWING QUARTER:    [ ]FALL 20\_\_ [ ]WINTER 20\_\_\_\_ [ ]SPRING 20\_\_

I PLAN TO ENROLL IN THE FOLLOWING COURSES:

	<u>COURSE#</u>	<u>TITLE</u>	<u>UNIT</u>	<u>INSTRUCTOR</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

\*All graduate students are to be full-time and enrolled in 12 units with the exception of those students who have received prior department approval for part-time status. (291- Directed Reading, 299- Dissertation Research can only be S/U; 290-Individual Study can only be S/U for M.A. students and letter grade for Ph.D. students).

\_\_\_\_\_  
Student's Signature

Date

\_\_\_\_\_  
Academic Advisor's Signature

Date