

**COLLEGE OF BUSINESS GRADUATE COURSES -- NON-MAJOR ENROLLMENT REQUEST**  
**PLEASE PRINT (Please complete form, obtain adviser's signature, and return form to COB 201.)**

Date \_\_\_\_\_

Name \_\_\_\_\_  
*First Middle Last (Family)*

University ID: \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ ULID: \_\_\_\_\_

ISU graduate degree program in which you are enrolled: \_\_\_\_\_

Intended graduation semester: \_\_\_\_\_

**Information on course requested:**

Semester: \_\_\_\_\_ Year: \_\_\_\_\_

Department:  ACC (552)  FIL (548)  MBA (557)  MKT (559)  MQM (558)

Course number: \_\_\_\_\_ Section number: \_\_\_\_\_

Prerequisite course(s) completed:

(Please note that transcripts and official university syllabi are required for non-ISU courses.)

Course dept./number	Course title	Level (UG/G)	Year/Semester	University
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Other MBA courses you have completed or are enrolled in: \_\_\_\_\_

Graduate adviser's approval (signature): \_\_\_\_\_ Date: \_\_\_\_\_

----- (for office use only) -----

Prereq's verified: \_\_\_\_\_ Number of courses: \_\_\_\_\_  
 on mainframe  via syllabus on (date): \_\_\_\_\_ by (initials): \_\_\_\_\_ ug \_\_\_ f \_\_\_ c \_\_\_ e \_\_\_

Added to waiting list on \_\_\_\_\_ by \_\_\_\_\_  
*date initials*

Type of override approved:  regular override  closed class override

Override approved on \_\_\_\_\_ by \_\_\_\_\_  
*date initials*

Override completed on \_\_\_\_\_ by \_\_\_\_\_  
*date initials*

Student notified of override on \_\_\_\_\_ by \_\_\_\_\_  by phone  in person  e-mail  
*date initials*  left message

Student Registered for class as of \_\_\_\_\_