



OFFICE OF THE REGISTRAR
YALE LAW SCHOOL
 127 Wall Street
 New Haven, CT 06511

**Request to Take Course at the Law School
 (Graduate/Professional Students Only)**

PURPOSE: Request to take a course at the Law School. Non-Law students may take only **one** law course per term.

INSTRUCTIONS: Complete and obtain the instructor's signature. Complete and obtain the signature of your school registrar. Return this form with the two signatures to the Law School Registrar's Office. Once we have authorized your enrollment, a copy of this form will be sent to your school's registrar. Your registrar will finalize your record to reflect your enrollment in the course.

Fall Term 2016

Student Information

Last Name: _____ First Name: _____ Student ID#: _____
 Class Year: _____ Department/School: _____ Email: _____

Course Information

Title of Course: _____
 Course#: _____ Section: _____ CRN: _____

I understand the following:

- If I decide to drop the course, I will obtain permission from the instructor and inform the Law School registrar's office. If an examination is required in the course, no drop forms will be accepted once the examination period has begun.
- I must file any necessary forms with my school's registrar by the stated deadlines for my school. My school will determine fees for dropping courses.
- My school registrar will determine whether I may take this course for credit and my school registrar will determine the number of credits that I may earn for the course.
- The Law School's calendar may differ from my school's calendar; exams may be held after the end of my school's term; grades may not be available by the deadline for my school.
- The schedule of class meetings, the administration of the final examination for the course, the course requirements, and the submission of final grades follow the Law School rules, calendar and deadlines, and are not subject to change to accommodate my school's rules or calendar.

Student Signature: _____ Date: _____

Instructor (please print name):

 Instructor Signature:

 Date: _____

Graduate/Professional School: _____
 Approved
 Not Approved
 Units/Course Credits: _____
 DGS or PS Registrar's Signature:

 Date: _____

Status of Petition:
 Approved
 Not Approved
 Law School Registrar's Signature:

 Date: _____