

PERMISSION TO ENROLL IN SPECIAL CLASSES (BLUE CARD)

Please submit form to ECE department for processing.

Please allow 5 business days

Student Information (must be completed by the student)				
My WSU ID:		Student's Name:		
		FIRST		LAST
Student's En	-			
Student's pro	ogram:			
Course Information (must be completed by the student)				
Select one	`	Title	Program	Maximum credit hours
	ECE 790	Independent Study	BS / MS / PhD	3
	ECE 876	MS Thesis	MS	6
	ECE 878	MS Directed Project	MS	3
	ECE 976	PhD Dissertation	PhD	9
	ECE 990	Advanced Independent Study	PhD	6
Other Cour	rse:			
Approval (must be completed by the advisor/instructor)				
This student has my permission to enroll in the above selected course.				
Credit hours:		Semester:	20	
For "SoC" courses: the student submitted the course plan and I have approved the plan, expected outcomes, and evaluation method.				
Instructors Name:		Instructors myWSU ID:		
Instructors Signature:		Today's Date:		D.
			Today 5 Date.	
For office use only				
Date Received:		Date Processed:	NEW CRN#	
Student Ema	niled:			

Notes:

Admin Signature:

- Please type all the fields expect the signatures.
- Digital approval is recommended. Please use Adobe PDF reader, do not print.
- It is the responsibility of the student to select the appropriate course
- If a student is taking EE 976, advisor can approve for more than 9 credit hours for the semester, with a written explanation from the student. The explanation should be attached with this form.

Date: