



School of Teacher Education and Leadership, Utah State University Thesis/Dissertation Credit & Continuing Graduate Registration Enrollment Request

This form is required for:

- TEAL 6970 Thesis Credit for Graduate Students
- TEAL 6990 Continuing Graduate Registration
- TEAL 7970 PhD Dissertation
- TEAL 7990 PhD Continuing Graduate Advisement

You must have approval from:

- Your Advisor/Committee Chair
- The Program Director

The student must return this form filled out completely, with the advisor's/committee chair's/committee co-chair's signature(s) before the Program Director will sign. Return the completed form to Heather Ericson via email (heather.ericson@usu.edu) or to the TEAL Office, Room EDUC 385. When the Program Director has signed the form, an email will be sent to the student with instructions on how and when to register for the newly created course.

I request enrollment in TEAL _____ for _____ credits during the _____ semester of the year _____.

Student's Printed Name: _____ A Number: _____

Student's Signature: _____ Date: _____

Student's Email: _____

By signing this form, the advisor/committee chair/committee co-chair understands they will be recorded as the instructor of record in Banner and responsible for recording a grade at the end of said semester. The grade entered at the end of said semester will depend on the status of the students thesis/dissertation. Until the thesis/dissertation is successfully defended and submitted to the School of Graduate Studies an "Incomplete" grade will be recorded. When the degree is awarded by the School of Graduate Studies, a Change of Grade will be requested by the advisor/committee chair/committee co-chair then approved and submitted by the Program Director to show "Pass".

Advisor's/Committee Chair's Printed Name: _____ A Number: _____

Advisor's/ Committee Chair's Signature: _____ Date: _____

Advisor's/ Committee Chair's Email: _____

Committee Co-Chair's Printed Name: _____ A Number: _____

Committee Co-Chair's Signature: _____ Date: _____

Committee Co-Chair's Email: _____

Program Director's Signature: _____ Date: _____