

## Request to Enroll in a Non-LBJ Course at UT

**Student Name:** \_\_\_\_\_

EID: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Title of Course: \_\_\_\_\_

Department: \_\_\_\_\_

Abbr/Unique: \_\_\_\_\_ Semester/Yr: \_\_\_\_\_

Will Count as: General Elective:

*(check beside  
your selection)*

Specialization Elective:

Specialization Name: \_\_\_\_\_

Other (specify): \_\_\_\_\_

Brief Course Description: *(attach syllabus)*

### **Required Signatures** *(Coordinator signature needed if specialization chosen)*

Specialization Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_

Graduate Adviser: \_\_\_\_\_ Date: \_\_\_\_\_

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