## PERMISSION SLIP for INTERSESSION FOR MORE THAN 5 CREDITS

## (Request will not be processed until after the first day of classes)

NAME		SEMESTER		GPA
ID#		GRAD DATE	EMAIL	
<b>CREDITS:</b>	CURRENT	ADDITIONAL REQU	UESTING	TOTAL
		_		n at least 15 earned credits may 5 credits for the semester.
What course(s	s) would you like to add			
				_
App	rovedDenied	Dr. Meg Reitz, Interim D		Date

Please email this form to advising@geneseo.edu

Updated 9/2024