

**DEPARTMENT OF ELECTRICAL AND COMPUTER ENGINEERING
WESTERN MICHIGAN UNIVERSITY**

PERMISSION TO TAKE ECE 5000 COURSE AS AN UNDERGRADUATE

TERM: **F** _____ **S** _____ **SU-I** _____ **SU-II** _____

YEAR: _____

NAME: _____

WIN: _____
Western Identification Number

PHONE#: _____ **G.P.A.** _____

EMAIL: _____

COURSE:

CRN:

STUDENT'S SIGNATURE:

DATE:

INSTRUCTOR'S APPROVAL:

DATE:

- Course will be taken as a required course for graduation.**
(fulfills _____ requirement)
- Course will be taken in excess of required courses for graduation.**

UG ADVISORS APPROVAL:

DATE:

DEPARTMENT CHAIR APPROVAL:

DATE:
