## Department of Chemistry and Biochemistry Request Approval for Taking a Non-CHM Course

Student's Name:		Panther ID:	
Course to be taken:			
Course Number: _	Of	ffered by Department:	
Title:			
Justification (be specific)	:		
Approved by:			
Dissertation Committee (	name and signatu	re):	
1. Advisor:	M		G.
2.	Name		Signature
<b>2.</b>	Name		Signature
3.	Name		Signature
4.			
_	Name		Signature
5.	Name		Signature
Graduate Program Direc	tor		
Name		Signature	