

**UNIVERSITY OF MISSOURI
TRAVELING SCHOLAR PROGRAM**

UNIVERSITY OF MISSOURI-KANSAS CITY
TRAVELING SCHOLAR PROGRAM
COURSE REQUEST FORM
 (use separate form for each course)

ENROLLMENT INFORMATION AT UMKC

NAME	ADDRESS
STUDENT NUMBER	HOME CAMPUS UMKC
DEPARTMENT	CURRENT DEGREE SOUGHT
HOST CAMPUS	SEMESTER: FS__ WS__ SS__
PROPOSED COURSE (<i>List department, course number and exact title</i>)	
	CREDIT HRS.
MAJOR ADVISOR'S SIGNATURE	DATE
UMKC DEAN'S SIGNATURE	DATE

APPROVALS

Permission to enroll as a Traveling Scholar does not guarantee that the course or space in a course will be available.

MAJOR ADVISOR (home campus)	DATE
GRADUATE DEAN (home campus)	DATE

If there are specific technologies being utilized (such as Web CT or Blackboard) for this course, please note them below.

FOR USE BY HOST GRADUATE STUDIES OFFICE

FACULTY MEMBER'S NAME AND DEPARTMENT (individual teaching course)	DATE
GRADUATE DEAN'S SIGNATURE (Host Campus)	DATE

COMPLETION OF COURSE

GRADE	DATE	SIGNATURE OF FACULTY MEMBER TEACHING THE COURSE
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