

## Request For Authorization To Teach Graduate Level Course

The Graduate Studies Committee in the Department of \_\_\_\_\_ requests that the faculty member listed below be authorized to teach the graduate level course, or courses specified in the forthcoming **Course Schedule**.

NAME \_\_\_\_\_  
UT EID \_\_\_\_\_  
RANK \_\_\_\_\_  
HIGHEST DEGREE AWARDED \_\_\_\_\_ YEAR \_\_\_\_\_  
MAJOR \_\_\_\_\_

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Course Number	Semester/Term	Year
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Please submit an academic vita *or* a brief statement concerning educational and professional qualifications of the above-listed faculty member for conducting this course. Also include a list of publications.

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***Please note: No one who is a graduate student at this or any institution is permitted to teach a graduate course.***

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Prepared By: (Please type or print)	Mail code	Phone	Fax
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Chair, Graduate Studies Committee	Signature	Date
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___ Approved	_____	_____	_____
___ Denied	Office of Graduate Studies	Date	Date Mailed

Requests should be returned to the Office of Graduate Studies, G0400.

OGS/REQAUTH -01/03