

**Student Name:** \_\_\_\_\_ **Student ID #:** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

**Deadlines:**      **Spring and Summer**                      **February 2<sup>nd</sup> through October 1<sup>st</sup>**  
                                 **Fall**    **October 2<sup>nd</sup> through February 1<sup>st</sup>**

Advance in Class Forms are due to the Office of the Registrar by the deadlines listed above; this helps to ensure that the new "Class of" is in place for the upcoming registration period.

In order to facilitate timely completion of graduation requirements, Cal Maritime will allow transfer students an opportunity to "advance in class."

**Instructions:**

For your major, **print and attach** the appropriate class **Curriculum Sheet**. Review the courses completed on the requested new class Curriculum Sheet with your **advisor or department chair**. Student's seeking an advance in class must have completed a significant number of courses leading up to the semester in which the advance will take place.

**Please use blue or black ink; print legibly.**

Please provide a reason or explanation for the Advance in Class request.

<i>Class Information?</i>	<i>What is your major?</i>
What is your current "class of"? _____  What "class of" would you like to advance to? _____  Expected Grad Term: _____	<input type="checkbox"/> Business Administration <input type="checkbox"/> Global Studies and Maritime Affairs <input type="checkbox"/> Facilities Engineering Technology <input type="checkbox"/> Marine Engineering Technology <input type="checkbox"/> Marine Transportation <input type="checkbox"/> Mechanical Engineering <input type="checkbox"/> CG License Option <input type="checkbox"/> ME Option

Did you start Cal Maritime as a:    First Time Freshman    Transfer Student from Another College or University    PostBacc/2<sup>nd</sup> Bachelor's Degree

**Student Acknowledgment:**

I understand that I will work closely with my academic advisor in ensuring that I stay "on track" with the new curriculum. I also understand that if this request is not approved, that I will follow the requirements in my current class curriculum sheet.

**Student's Name (Please print):** \_\_\_\_\_

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Department Chair or Academic Advisor Decision Required:**

- I have reviewed the student's academic record, and approve the advance in class request.  
 I have reviewed the student's academic record, and do not approve the advance in class request.

**Department Chair or Academic Advisor**  
**Name (please print):** \_\_\_\_\_

**Department Chair or Academic Advisor**  
**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**ATTACH CURRICULUM SHEET**

**RETURN TO THE REGISTRAR'S OFFICE**