

PHIL-X 490 Authorization-Readings in Philosophy

Semester / Summer Session

Academic Year

Term

Name: _____
(last) *(first)*

Student ID #: _____

I, _____ hereby give my permission for this student to take X490 with me.
Print Faculty Name

Date

Faculty member's Signature

Date Completed: _____

Grade: _____

Description of coursework:

For KayLee Witt – entered class permission on: _____