

Loyola University Chicago
INSTITUTE OF PASTORAL STUDIES
INTER-PROGRAM COURSE ENROLLMENT FORM
IPS to Other

Students who want to take a course in another Loyola department/program/school must fill out the information below, secure the proper permissions and signatures, and return the form to the IPS Office.

IPS Student Name: _____, ID# _____

has my permission to register for a non-IPS course in the following Loyola

Department/School _____

Course Number: _____ Department Number: _____ Section Number: _____

Course Title: _____

Signature of Host Course Instructor _____ Date _____

IPS Graduate Program Director _____ Date _____

After completion of this form, please return it to IPS.

For office use only

Date completed and filed with IPS _____