

**Complete and return this form to:**  
University of Rochester - Simon Business School  
Office of the Registrar  
245R Gleason Hall  
[registrar@simon.rochester.edu](mailto:registrar@simon.rochester.edu)  
Phone: (585) 275-3533 / Fax: (585) 271-3907



### **GBA491 MASTER READING COURSE FORM**

**Directions**

- Use this form to register for a Master Reading Course, which constitutes an agreement between the student and instructor. It requires approval of the Senior Associate Dean of Faculty and Research. If this course is intended as a course substitution or to count towards a concentration, specialization or minor, then approval is also required from the Area Coordinator.
  - Students cannot use a paid project, job or Internship as the proposed curriculum for a Masters Reading Course.
- \*\*Instructors: Grades will be submitted using a GBA491 Master Reading Course Final Grade Form.**

**Student Name:** \_\_\_\_\_ **UID#:** \_\_\_\_\_  
*Please print*                      Last                                      First                      MI

**Program:** \_\_\_\_\_

**Advisor's Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_ **Print Name** \_\_\_\_\_

Quarter:  Spring quarter     Summer quarter                      Academic Year:   2018-2019  

**\*\*Please attach a complete description of the proposed curriculum for this course, specifying all readings and deliverables. The total expected student hours should be 45 per credit earned, which is 135 hours for a typical 3.0 credit-hour course:**

\_\_\_\_\_  
*Student's signature*                                      *Date*                                      *Print Name*

\_\_\_\_\_  
*Instructor's signature*                                      *Date*                                      *Print Name*

\_\_\_\_\_  
*Sr. Associate Dean of Faculty & Research Signature*                                      *Date*                                      *Print Name*

**If you intend this Reading Course to substitute for a specific course or toward an MBA concentration, specialization or minor, then you must also obtain approval from the Area Coordinator before the start of the course.**

Course: \_\_\_\_\_ or Concentration/specialization/minor: \_\_\_\_\_

\_\_\_\_\_  
*Area Coordinator*                                      *Date*                                      *Print Name*

**\*Registrar's Office Use Only\*** **Revision: 3/2019**

*Date Received:* \_\_\_\_\_ *Date Processed:* \_\_\_\_\_ *By:* \_\_\_\_\_ *No hold:* \_\_\_\_\_ *Course created & student enrolled:* \_\_\_\_\_