Application to Enroll in Variable-Credit Courses
Department of Kinesiology
Michigan State University

Complete one form for each variable-credit course in which you enroll. Take the completed form to
the Department of Kinesiology offices in 134 IM Sports Circle.
** Note – undergraduate advisors do not sign this form. **

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Student Information
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Name ___________________________ PID _____________________
(last, first, middle initial)

Level: FR SO JR SR GR Major ______________ Cumulative GPA ___________

Phone ( ________ )________________________ Email ______________________________

Number of credits in other variable-credit courses this semester _____ credits

Total number of prior variable-credit credits _____ credits

Are you currently an MSU varsity athlete?                                        Yes     No

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Course Information
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Section ________ Credits ______  Semester:   FS   SS   US         Year _______

[ ] KIN 427 – Clinical Rotations in Athletic Training

Consult with undergrad AT advisor

[ ] KIN 490 – Independent Study

[ ] KIN 890 – Independent Study in Kinesiology

[ ] KIN 990 – Independent Study in Kinesiology

[ ] KIN 494 – Fieldwork

[ ] KIN 495 – Undergrad Research Experiences

[ ] KIN 894 – Field Experiences in Kinesiology

[ ] KIN 492 – Internship

Also complete the Application for Independent Study available on
the KIN website at http://education.msu.edu/kin/undergrad/undergraduateforms/default.asp

[ ] KIN 493 – Internship

Additional information posted the KIN website at
http://education.msu.edu/kin/undergrad/undergraduateforms/default.asp

[ ] KIN 893 – Internship in Kinesiology

Consult your academic advisor
before enrolling in these courses.

[ ] KIN 897 – Project in Kinesiology

Also review the policies posted on
the KIN web site at
http://education.msu.edu/kin/resources/bylaws-policies-new.asp

[ ] KIN 899 – Master’s Thesis Research

[ ] KIN 995 – Research Practicum in Kinesiology

[ ] KIN 999 – Doctoral Dissertation Research

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Sign-Offs
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Student _______________________________________________   Date ________________
Instructor ______________________________________________   Date ________________
Graduate Advisor (if applicable) _____________________________   Date ________________