



YALE UNIVERSITY

GRADUATE SCHOOL OF ARTS AND SCIENCES

Non-Cumulative Registration Request Form

REGISTRAR

ASSOCIATE DEAN

**This form is to be completed only by Ph.D. students.**

In certain areas of study, it may be necessary for a registered student to acquire an academic skill (typically, knowledge of a foreign language) that is essential for a degree requirement or for research in a particular field and for the overall progress of the dissertation but is not an inherent part of the dissertation itself. A student in this situation may request up to one year of "non-cumulative registration." It is important to note that general study in a field related to or parallel with the topic of the dissertation is *not* appropriate for non-cumulative registration.

A student who wishes to have a specific period of study designated as "non-cumulative" should discuss the reasons for such a period of study with and secure prior approval from his or her associate dean. If prior authorization has been given by the Graduate School, the period of time spent in acquiring the necessary academic skill will not be counted as part of the student's six-year period of candidacy. The Continuous Registration Fee (CRF) is charged during the period of non-cumulative registration. Non-cumulative registration does not change the four-year full-tuition obligation. The tuition charge and any University Fellowship aid will be postponed if a student registers non-cumulatively before the four-year full-tuition obligation has been satisfied.

**To be completed by the student (please save before printing):**

Name: \_\_\_\_\_ SID: \_\_\_\_\_  
Last First

Department: \_\_\_\_\_ Year of Study (current): \_\_\_\_\_

Term:  Fall  Spring Year: \_\_\_\_\_

Please update your mailing address information online at <http://www.yale.edu/sis> or, if necessary, below:

U.S. Mailing Address: \_\_\_\_\_  
Street City State Zip Code

Email: \_\_\_\_\_ Phone: ( ) \_\_\_\_ -- \_\_\_\_

Effective Dates for this address: \_\_\_\_\_  
From To

Advisor's Name and Campus Telephone: \_\_\_\_\_

I wish to register non-cumulatively during: Term:  Fall  Spring Year: \_\_\_\_\_

Place of Study: \_\_\_\_\_

Reason for non-cumulative study: \_\_\_\_\_

\_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**To be completed by the Director of Graduate Studies:**

**NB:** Students are normally expected to register in residence. Your support for non-cumulative registration should only be given if there are compelling academic reasons (e.g., need to acquire academic skill – foreign language) and only if the student is current with all Graduate School and departmental requirements.

I recommend this request. \_\_\_\_\_  
Signature of Director of Graduate Studies Date

**To be completed by the Associate Dean:**

I approve this request. \_\_\_\_\_  
Signature of Associate Dean Date

Distribute copies to:  Financial Aid Office  Home Department  Yale Health Services

After department approval, either (1) fax to 203-432-6904 or  
(2) send to Graduate School Associate Deans' Office, Hall of Graduate Studies (HGS) Room 1344