

Approval of Transfer Courses

Students are required to use this form to secure approval of any courses to be taken at another institution during or after their first term of enrollment. The form should be completed and approved prior to enrollment in the desired off campus class. Following completion of the course, students must submit an official transcript to Benedictine University. Students are responsible for understanding and complying with all curricular requirements stated in the current Undergraduate Catalog.

| Student Na | nme: | | | | | | | |
|--|--|---|--|--|---|--------------------------------------|--|--|
| Student ID #: | | | | | | | | |
| Name of the visiting institution (Where will you be taking the course?): | | | | | | | | |
| Term the course is going to be taken (When will you be taking the course?): | | | | | | | | |
| Course Information at the Visiting Institution: | | | Course Equivalent at Benedictine University: | | | Approved (for office use only) | | |
| Course Number (ie: MATH- 110) | Course Title at Visiting Institution | Credit hours at the visiting institution | Course number at Benedictine University | Course Title at Benedictine University (If there is no exact equivalent, write the requirement the course is intended to fulfill.) | Credit hours at Benedictine University | | | |
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| STUDENT: I certify that the information provided is accurate to the best of my knowledge and that I understand the repeat policy and transfer credit policies stated in the Benedictine University Catalog. | | | | | | | | |
| Student Signature: Date: | | | | | | | | |
| | hat the courses indicated abov e equivalent Benedictine cours | _ | • | grade, will be transferable to Benedi above. | ictine Univers | sity at | | |
| Advisor Signature: Date: | | | | | | | | |
| | | | based on the | e information available on the date th | is form was | reviewed | | |
| | | | | | | Date: | | |

| Copy to: | Permanent record \Box | Student \square |
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