

## Request for Exception to Community College Credit Limit

To be completed and submitted by students with junior or senior standing (60 or more semester credit hours earned) applying for an EXCEPTION to the Community College Credit limit.

This form should be completed and approved <u>prior</u> to enrollment in the desired class. Following completion of the course, students <u>must</u> submit an official transcript to Benedictine University. Students are responsible for understanding and complying with all curricular requirements stated in the current Undergraduate Catalog. Coursework required by special agreements such as 3+1 or 2+2 programs may be exempt from the community college credit limit.

Please submit form to the Office of the Registrar at <a href="mailto:creditevaluation@ben.edu">creditevaluation@ben.edu</a>. An approval or denial notification will be sent to the student's BenU e-mail address.

Name			Student ID#				
		First	First MI				
Earned I	In Progress:	ress: Expected Term of Degree Completion:					
20	_ □ FA □ SP	□ SU				☐ Community College	
Term course(s) to be taken Name of			Visiting Institution			☐ Accredited Four-Year U	University
Visiting Ins	titution Information			Course Equ	uivalent at Be	enedictine University	
Subject & Course #	Course Title		Credit Hours	Subject & Course #	Course Title	(If no equivalent, indicate equirement to be met.)	Credit Hours
-	oat the information provi on I have provided on thi		best of m	y knowledge ar	nd I understand	that the signatures below are based .	solely on the
Student Signature				Date			
courses, includ Check all b	ding labs or co-requiren	nents) through eligil	ple comm	unity college d	redit under th	nplete no more than 6-8 of those of following conditions: ress, as demonstrated by curren	·
transcript an		1			, 1 0	,	
	NE OF THE FOLLO						
for a full terr		dent's usual acader	nic cale	ndar, i.e. sen		or from the student's home can r, etc.) following the planned do	
The reque to the studer that failure to	nts planned graduatio	n date (as applied	for and	audited), an	d the student	or from the student home camp provides documentation estab- nent, promotion, or professiona	ishing
The stude	ent's permanent plac 100 miles from the l		establisl	ned by FASF	A, tax record	ls or other proof of long-term r	residency)
	ent's place of residen	ce has been reloca	ited as a	consequenc	e of active m	ilitary service.	



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## PART II Approval (All signatures required) Academic Advisor (Signature) Date Department Chair (Signature) Date Dean (Signature) Date Upon approval by the Academic Advisor; Department Chair; and Dean; and after review of the student's transcript, I approve the transfer of credit as stated above. (Note: If the official is unable to approve the request, the student and advisor will be notified.) Office of the Registrar Official Signature Date 54-hour rule Not Met Met 30-hour Res. Req. Met Not Met