



College of Arts and Sciences Office of the Dean

300 College Park, Dayton, OH 45469-0800
 (937) 229-2611 Fax (937) 229-2615
 email: casdean@udayton.edu

UNDERGRADUATE TRANSFER CREDIT PRE-AUTHORIZATION

Date: _____

Name:		College/University you plan to attend:	
Address: <small>(Home address)</small>		City, State	
City, ST, ZIP		TERM TO BE TAKEN (ex: Summer 2013):	
Student ID		EMAIL ADDRESS:	
MAJORS(s)		PHONE :	

Pre-Authorization Procedure

1. Complete all information in the table above.
2. Complete **ONLY** the left side of the table below, listing only courses you have verified will be offered during the identified semester.
3. **Attach a course description for each course to be approved.**
4. Provide your signature indicating your awareness of all provided procedures and policies.
5. Submit completed form to the College of Arts and Science Dean’s office, 104 O’Reilly Hall.

Important Transfer Credit Policy

- Transfer credit is awarded only for course work earning a grade of C- or better.
- Transfer credit will not affect your UD cumulative GPA. **(The University of Dayton Retake Policy does NOT apply to transfer courses.)**
- Transfer credit will not be awarded for a course equivalent to any course previously taken at UD with a grade of D or better.
- Pre-authorization of the transferability of a course **DOES NOT** guarantee the course will meet any specific degree requirement. Students are encouraged to discuss application of transfer credits to degree requirements with their academic advisor.
- Students are responsible for having an **OFFICIAL** transcript sent to UD. Credits will not appear on advising reports or housing and registration status until official transcripts have been received and processed. **OFFICIAL TRANSCRIPTS SHOULD BE SENT TO: University of Dayton Registrar 300 College Park Dayton, OH 45469-1668.**

Student Signature: _____

COURSE(S) TO APPROVE (COMPLETED BY STUDENT)				UD EQUIVALENT <i>(MUST BE FILLED OUT BY DEAN'S OFFICE ONLY)</i>			
DEPT.	COURSE NO.	COURSE TITLE	CR. HRS.	DEPT.	COURSE NO.	COURSE TITLE	SEM HRS.

Remember to attach a course description for each course listed above.

Assistant Dean signature _____

Date _____

College seal _____