

FORM WILL BE READY TO PICK UP FROM THIS OFFICE IN TWO WEEKS

School of Education & Health Sciences Dean's Office
300 College Park, Dayton, OH 45469-2969 (937) 229-3146
UNDERGRADUATE TRANSFER CREDIT PRE-AUTHORIZATION

Updated 06/21/2017

| | | | |
|-------------------------|--|--|--|
| Name: | | College/University you plan to attend | |
| Home Address: | | City and State of College | |
| City, State, Zip | | TERM TO BE TAKEN (Ex: Summer 2018) | |
| Student ID # | | E-mail Address | |
| Major(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 **AND THE COMPARABLE U.D. COURSE IT WILL REPLACE.**
4. Provide your signature indicating your awareness of all provided procedures and policies.
5. **Submit** completed form to the School of Education and Health Sciences **Dean's office**, Fitz Hall, Suite 618. You will be notified by e-mail within 7-10 business days after submission to pick up the form.

Important Transfer Credit Policy

- Transfer credit is awarded only for course work earning a grade of C- or better (must be taken for a letter grade).
- Transfer credit will not affect your UD cumulative GPA. **(The University of Dayton Retake Policy does NOT apply to transfer courses.)**
- Students are encouraged to discuss application of transfer credits to degree requirements with their assistant dean.
- 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 by the Registrar's Office and processed.
- **It is the student's responsibility to verify that the courses have been posted appropriately to Degree Works once the courses have been officially transferred. Contact the Dean's Office at 937-229-3146 with questions.**

OFFICIAL TRANSCRIPTS SHOULD BE SENT TO: University of Dayton Registrar, 300 College Park, Dayton, OH 45469-1668

Student's Signature: _____

Date: _____

| COURSE(S) TO APPROVE <i>(COMPLETED BY STUDENT)</i> | | | | 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. |
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| | | | | | | | |

Date: _____

(College Seal)

Assistant Dean _____

Dr. Mary Lou Andrews
Assistant Dean and Licensure Officer.