



Undergraduate Petition for Advance Approval of Transfer Credit

Name: _____ SMU ID#: _____
(Last) (First)

Email Address: _____ Telephone: _____

Major/Pre-Major: _____ Date: _____

I request permission to take _____ at _____
(Course Designation) (Institution)
 in _____ during _____
(City) (State) Semester/Year (valid for above term only)

Institutional Type: 2-Year 4-Year Institutional Term: Semester Quarter*

I request to take this course (*check appropriate box/boxes*):

- To fulfill a requirement for general education. Specific Requirement: _____
- To fulfill a requirement for my major. Specific Requirement: _____
- To fulfill a requirement for my minor. Specific Requirement: _____
- As a free elective

I understand that final transferability/applicability of transfer credit will be determined after SMU receives my final transcript from the above institution.

Student Signature: _____ Date: _____

Policy Notes: Transfer courses from accredited institutions, for which advance approval has been obtained and in which a grade of C- or higher has been earned, may apply toward an SMU degree. A maximum of 30 hours may be transferred in after matriculation at SMU. A written petition must be on file in the Registrar's Office and in the school of record. **All approvals are subject to policies as stated in the SMU undergraduate catalog. To receive SMU credit for the course, the student must have an official transcript with the final grade sent to the University Registrar, P.O. Box 750181, Dallas, TX 75275-0181.** Foreign transcripts must be evaluated by a third-party evaluator. Level of the transfer course is determined by the transfer institution, not by SMU. *Approved courses from institutions with a quarter system are transferred with 65% of the number of credits awarded by that institution.

	APPROVED	NOT APPROVED	DATE
Academic Advisor:			
Recommendation by Chair of SMU department offering equivalent course: The SMU Equivalent assigned by the department offering the equivalent course is: _____ <small>(Course Prefix) (Course Number) (Course Title)</small>			
	APPROVED	NOT APPROVED	DATE
Signature of Chair of SMU department offering equivalent course:			
Course's Academic Dean/Director:			
Student's Academic Dean/Director:			
Associate Dean for General Education (only required for courses fulfilling General Education requirements): Clements Hall G02			