

PETITION TO APPROVE TRANSFER CREDITS

(For courses that have been already accepted as transfer courses by the Office of Admissions)

Date: _____ **Student ID:** _____
Name: _____
Address: _____
Phone No.: _____ **Email:** _____
Transfer University: _____

Please indicate your track within the department:

- | | |
|--|--|
| <input type="checkbox"/> Academic Major | <input type="checkbox"/> Teaching Major |
| <input type="checkbox"/> Academic Honors | <input type="checkbox"/> Teaching Honors |
| <input type="checkbox"/> Academic Minor | <input type="checkbox"/> Teaching Minor |

Instructions for completing this petition:

1. In order to transfer courses to the History Department, they must first be approved by the University of Utah as transfer credits. Once they have been approved and appear on your DARS report you can begin the petition with the History Department.
2. Obtain syllabi for each course that you would like to transfer. The department **must** have the syllabi to evaluate the course by our curriculum standards.
3. Deliver the syllabi and this form to the Undergraduate Academic Advisor in Carolyn Tanner Irish Humanities Building (CTIHB) 310. The Academic Advisor will then have the appropriate faculty members evaluate the syllabi for transfer approval.
4. Transfer credits can take up to a month for department approval. Once the decision has been made, you will receive an email with the department's decision.

Please list all potential Transfer Courses:

Would you like this petition returned to you after it is processed? Yes [___] No [___]

FOR OFFICE USE ONLY

ATTENTION FACULTY REVIEWER:

Please fill out this box completely and return to the academic advisor's box. If multiple classes are being reviewed at one time, please use the additional boxes below.

Approve as: HIST _____ upper division equivalency approval [___] OR lower division equivalency approval [___]
Deny _____
Comments _____ _____ _____
Faculty Reviewer Signature _____ Date _____

Approve as: HIST _____ upper division equivalency approval [___] OR lower division equivalency approval [___]
Deny _____
Comments _____ _____ _____
Faculty Reviewer Signature _____ Date _____

Approve as: HIST _____ upper division equivalency approval [___] OR lower division equivalency approval [___]
Deny _____
Comments _____ _____ _____
Faculty Reviewer Signature _____ Date _____

Approve as: HIST _____ upper division equivalency approval [___] OR lower division equivalency approval [___]
Deny _____
Comments _____ _____ _____
Faculty Reviewer Signature _____ Date _____