Transfer of Graduate Courses for Graduate Degrees
(courses must also appear on degree plan)
BOBBY B. LYLE SCHOOL OF ENGINEERING
SOUTHERN METHODIST UNIVERSITY

To: Graduate Division, Southern Methodist University
Date: ________________

Name of Student:
Last       First       Mailing Address - Street

SMU ID Number: ____________________________
City, State Zip

Major Department: ____________________________
Academic Advisor: ____________________________

Credit recommended for transfer to SMU degree of: ____________________________

(Attach official copy of transcript where course(s) taken as well as a catalog description)

Name of Institution: ____________________________
Name of equivalent degree offered: ____________________________

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Credit</th>
<th>Grade</th>
<th>Semester Taken</th>
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Petitioning to transfer to the School of Engineering as: (indicate equivalent SMU course name and number)

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PLEASE ENCLOSE CATALOG DESCRIPTION OF COURSE(S)

Official classification of student when course(s) were taken (graduate), (undergraduate) ________________

Approved by: ____________________________
Recommended by: ____________________________

Director of Graduate Division ____________________________
Faculty Advisor ____________________________
Department Chair ____________________________

Special Notes:

Please email this form, course descriptions and transcripts directly to your faculty advisor for review.