SOUTHERN METHODIST UNIVERSITY UNIVERSITY REGISTRAR

UNDERGRADUATE PETITION FOR ADVANCE APPROVAL OF TRANSFER WORK

Name: _____ SMU ID: _____

Phone Number: _____

Address/Phone: Verify your home and mailing address and phone information in Access.SMU.edu. This information may be used to communicate with you.

Email: Your SMU assigned email (_____@mail.smu.edu) may be used to communicate with you.

Major: _____

I request permission to take _____ at _____
Course designation/Title Institution

In _____ during _____.
City/State ***Valid for Above Term Only***

Institutional type: ☐ 2-Year ☐ 4-Year Institutional Term: ☐ Semester ☐ Quarter

I am taking this course (check appropriate box/boxes):

☐ To fulfill a general education requirement: Specific requirement: _____

☐ To fulfill a requirement for the following major: _____ Specific requirement_____

☐ To fulfill a requirement for the following minor: _____ Specific requirement_____

☐ As an elective

I understand that it is my responsibility to complete this form, submit it to the appropriate office, and follow this request through for a final decision.

_____ _____
Student Signature Date

The SMU Course Equivalent assigned by the department offering the equivalent course is:

Course Prefix Course Number Course Title

Approved: _____ Date: _____

Not Approved: _____ Date: _____

Department Chair (recommendation from SMU department offering course equivalent)

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 towards an SMU degree. A maximum of 15 hours may be transferred in after matriculation at SMU. ***The level of transfer course is to be determined by the transfer institution***. Students are responsible for meeting the University and College residency requirements. A written petition must be on file in the Registrar's office, and in the school of record. All approvals are subject to these policies. To receive SMU credit for the course, you must have an official transcript with the final grade sent to the University Registrar, PO Box 750181, Dallas, TX, 75275-0181.

Endorsements	Approved	Not Approved	Date
1. Academic Advisor			
2. Academic Dean or Director, School of Student's Record			
3. Associate Vice Provost for General Education (Required for courses fulfilling general education requirements; 109 Clements Hall.) or Academic Dean of the Course (if applicable).			