



SMU ENGINEERING

Undergraduate Studies • 101 Caruth Hall • Phone: 214-768-3039 • Fax: 214-768-3883

Request to Transfer Engineering Courses to SMU

Today's Date: _____ SMU Student ID: _____

Student's Name: _____

Local Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ E-mail: _____

NOTE: Course(s) must be taken in semester & year shown or re-approval is required.

Major _____ Semester & Year of course(s) to be taken _____

Educational Institution _____ City _____ State _____

Reason for taking course(s) at a school other than SMU: _____

Course Number & Title from other institution: _____

To be used in place of the following SMU degree requirement: _____

NOTE: The student must provide course descriptions from the other institution suitable for evaluation purposes.

Student's Signature Date

ENDORSEMENTS	APPROVED	NOT APPROVED	DATE
Engineering Advisor			
Engineering Department Chair			
Engineering Academic Dean			