

PRE-APPROVAL OF TRANSFER CREDIT

Please print clearly

Name _____ ID# _____

Major(s) _____ Minor(s) _____

SMCM E-mail _____ (When this form is processed during a semester, you will receive an email sent to your SMCM email account notifying you when the completed form is ready to be picked up at the Glendening Hall Student Services Desk. If the form is processed when a semester is not in progress, you will receive information via your SMCM email account.)

Name and location of institution where course(s) will be taken:

Institution _____ City _____ State _____

Semester and year courses will be taken: ☐ Winter 20__ ☐ Fall 20__ ☐ Spring 20__
☐ Summer 20__

*** IF THE INSTITUTION IS OUT-OF-STATE PLEASE ATTACH A COPY OF THE COURSE DESCRIPTION(S) TO THIS FORM. Otherwise you do not have to provide a course description unless notified.**

Course#	Course Title (from sending institution)	SMCM Equivalent You are Seeking

Please note that:

- The level of credits awarded in transfer (upper or lower division) will be based on the level granted by the transferring institution, not the level of the St. Mary's equivalent.
- The number of credits awarded in transfer will be based on the credit hours granted by the transferring institution, not the credit of the St. Mary's equivalent.
- This request is only valid for the semester and year indicated above.
- This process will confirm SMCM equivalency only; please see advisor and/or Department Chair to discuss whether or not the course equivalent would fulfill any major and/or minor requirements.
- It is the responsibility of the student to request that an official transcript be forwarded to the Office of the Registrar upon completion of the approved course(s).

Student's Signature _____ Date _____

Registrar's Office Signature _____ Date _____

For office use only:

Course #	SMCM Equivalent	Core Fulfillment