Andrews **D** University College of Education and International Services

PETITION

Transfer Credits

First Name	Last Name	ID#
Email		Degree
Address		Major Area
City	State Zip Code	Cognate Area
Country		Date

An OFFICIAL TRANSCRIPT from an accredited institution(s) must be on file in the Records Office before the credit will be transferred, and it is my responsibility to request the transcript(s) requirements. I understand the following restrictions.

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(Transcript should be sent directly to the Records Office)

graduation deadlines, etc

b. each course must have a grade of B (3.00) or higher.

PLEASE TYPE/PRINT

- research courses to meet the AU research requirement must be approved in the "Approved" column by с. professor who teaches the course.
- any other course substituting a required AU course must be approved in the "Approved" column by the d. professor who teaches the course.

			Institu	ition:						
Year Taken Course #			Course Title	# Credits	Grade	AU EquivCourse #		Approved	Deny	
Student Initial:				Date:				 *The graduate Dean's signature is needed for <u>any exceptions to</u> minimum standards voted by the 		
RECOMMENDED:							<u>Graduate Council</u> , including exceptions to policies for provisional/			
Academic Advisor:			Approve	🗌 Den	y Date	:		regular admission (including English Language standards), normal course loads, residency,		
Department Chair/Program Director:		Approve	🗌 Der	Deny Date:			degree candidacy and deadlines, time limitations on degrees, credit transfers, second degrees, updating, grade changes, grade-			
Dean, School of Education:		Approve	Der	ny Date	2:	point average re probation, comp examinations, pi			ents, academic ive theses/	
Dean, School of Graduate Studies:			Approve	🗌 Der	Deny Date:			dissertations, application for graduation deadlines, etc		