PETITION FOR TRANSFERRED CREDIT

Name:			ID#	Class Year:				
Last	First	MI						
Concentration*			Minor*					
Fall	Spring	Full Year	Summer	Winter				
Year	Year	Years	Year	Year				
I seek permission to transfer credit for courses from the following 🗌 U.S. institution or 🗌 Program Abroad:								

Name of U.S. Institution/Sponsoring U.S. Institution or Program

Name of Foreign Institution (if going abroad)

City, Country

I have read and understand the **Transferred Credit Policies for Matriculated Hamilton Students** (policy is found in the CREDIT FOR WORK AFTER ENROLLMENT section of the Registrar's <u>TRANSFERRED CREDIT POLICIES</u> webpage). Initial ______

				To be completed by Department Chair,				
			Is the	Program Director or Registrar only.				
			course	*See back of form for instructions.				
Hamilton Transfer Dept. Course # Transfer Course Title		in-person, online or asyn- chronous?	Approved for General	Approved for Conc. or Minor	Course Level (Ex:100)	Equiv. Hamilton Course		

To be completed by Registrar:				
Probable Hamilton Units:				
CAS Approval Tracking	Date			

Final approval is granted when you receive an emailed copy of your Petition for Transferred Credit from the Committee on Academic Standing.

