

**REQUEST FOR EVALUATION OF TRANSFER CREDIT
AS SUBSTITUTION FOR A PREPROFESSIONAL OR PROFESSIONAL COURSE**

Student Name: _____

Student Identification Number: _____

Local Address: _____

Telephone Number: _____

E-mail address: _____

GUIDELINES FOR COURSE APPROVALS: In general, all courses in the College's curricula fall into one of the following two categories:

(1) Courses which are part of the Butler University Core Curriculum. Forms for approval of transfer credit as substitution for core courses are available from the College of Liberal Arts and Sciences, Jordan Hall 237. These substitutions must be approved by the department which offers the class at Butler University.

(2) Courses which are either preprofessional or professional coursework. Students seeking approval of transfer credit as substitution for preprofessional or professional coursework should complete this form and return it to the Academic Affairs Office (PB107). The Associate Dean for Academic Affairs, in consultation with the Academic Affairs Committee and the instructor(s) of the relevant course, as necessary, will review these requests to determine if the coursework in question enables the student to proceed successfully to curricular completion.

Butler University course for which substitution is requested:

Course Number: _____

Course Name: _____

Course taken/to be taken at another school:

School: _____

Course Number: _____ Credit Hours: _____

Course Name: _____

Instructor: _____ Grade Received: _____

Textbook Used: _____

To facilitate evaluation of this request, please attach ALL materials that will permit a meaningful comparison to the course for which substitution is being requested. These should include a copy of the course syllabus, whenever possible, and may also include descriptions of the course from school catalogs, copies of transcripts, copies of the table of contents from textbooks utilized, etc.

STUDENT REQUEST FOR APPROVAL OF TRANSFER CREDIT

Describe below the rationale for requesting this substitution. This section must be completed by the student. If not completed, the request will not be considered by the Associate Dean.

I request that the course described, taken previously/to be taken, be substituted in the curriculum for the course named. I understand the course coordinator of the course may require me to complete a placement examination before considering this request. I further understand that acceptance of this request will approve transfer of the course to my Butler University transcript and will fulfill the course requirement in the program. However, in cases of unequal course credit hours, I understand that this course substitution does not reduce the total number of hours necessary for completion of my degree program.

_____ Date _____
Student's signature

APPROVAL OR DISAPPROVAL OF SUBSTITUTION REQUEST

The requested course substitution is hereby:

_____ APPROVED
_____ DISAPPROVED

This decision is based upon:

_____ information supplied by the student with this request.
_____ results of a placement test covering the course content.
_____ recommendation of the course instructor or coordinator

_____ Date _____
Associate Dean for Academic Affairs

This completed form must be on file in the student's folder in the Academic Affairs Office (PB107). Copies are sent to the student and the student's academic advisor.