

# Syracuse University

## College of Arts & Sciences

### DEPARTMENTAL TRANSFER CREDIT PETITION

#### Directions:

- Complete the form electronically and print.
- Please attach a current course syllabus and submit the form and syllabus to the appropriate department
- Matriculated students are limited to transferring in a total of 16 credits.

Name: \_\_\_\_\_ SUID: \_\_\_\_\_

Email: \_\_\_\_\_@syr.edu College: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

#### Course Information:

Name of College/University where course is offered: \_\_\_\_\_

Course Subject: \_\_\_\_\_ Course Number: \_\_\_\_\_ Course Term: \_\_\_\_\_

Course Title: \_\_\_\_\_ Number of Credits: \_\_\_\_\_

School Type (Optional): Semester School          Quarter School

Student Notes (Optional): \_\_\_\_\_

#### Signatures:

Student: \_\_\_\_\_ Date: \_\_\_\_\_

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#### **OFFICE USE ONLY**

##### Course Approval Information:

Approved As: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

Department/College Notes: \_\_\_\_\_

Department Chair/Minor Coordinator (Print Name): \_\_\_\_\_

(Sign): \_\_\_\_\_ Date: \_\_\_\_\_

College/School Undergraduate Office: \_\_\_\_\_ Date: \_\_\_\_\_

Date Received: \_\_\_\_\_ Date Evaluated: \_\_\_\_\_ Date Notified: \_\_\_\_\_

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College of Arts & Sciences | Maxwell  
Academic and Career Advising

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