Petition for Transfer of Graduate Credit

Please print:					
(Last Name, First Name, Middle Initial)				(Banner ID)	
Local Address:					
(St	treet, Apt)		(City)	(State)	(Zip Code)
E-mail Address:			Local Phone No.		
Degree Sought:			Current Major:		
earned elsewhere as credit for the course	a non-deg work prop	gree or tran	e student, desiring to transfer graduate credit sient student, may use this petition to do so. ansfer must be attached to this petition. The sulted for the other necessary conditions for	An official tranappropriate sec	nscript showing tion of the
			eive credit toward the SLU doctoral pro nother institution. Use the "Petition for A		
Course ID	Credit Hours	Final Grade	Institution Where Taken		SLU Equivalent*
* Enter SLU e	quivalen	t course nu	imber from the Catalog; use '5ELEC' or	'6ELEC' for e	lectives.
Signed:			Date:		
		(Advisor)			
Signed:			Date:		
		ld Chairperson			
Remarks/Special C	Condition	s imposed	by major field:		
			Data		
		College/School			
Remarks/Conditio	ns:				
•			rtment Registrar on		(Date)