PRINT FORM SAVE FORM RESET FORM

DILLARD UNIVERSITY

REQUEST TO ENROLL IN COURSE(S) OUTSIDE OF DILLARD UNIVERSITY

OFFICE OF RECORDS & REGISTRATION
CUM GPA: _____
Current Transfer Hours: _____
Processor: _____ Date: _____

Date: _____

Name: _____ ID #: _____ Classification: _____

I, hereby, request permission to enroll at _____ for the _____(semester) _____(year) in accordance with the guidelines stated in the University Catalog.

- All students must complete the last 30 semester hours of coursework at Dillard University.
- Students who have attended institutions prior to admission to Dillard University may transfer up to 75 hours of credit upon admission and will not be permitted to transfer any additional credits earned external to Dillard.
- Only credit hours, not grades are transferable. A student may transfer up to nine (9) hours each semester.
- Only comparable college-level courses in which the student has earned a grade of 'C' or better will be accepted for transfer credit.

Procedure for completing form:

1. Office of Records & Registration records cumulative GPA and transfer hours.
2. Student meets with Academic Advisor to complete form (a copy of the course description or course syllabus from other university must be attached).
3. Student secures signatures from appropriate persons, then student returns the original form to Records & Registration.

I plan to enroll in the following course(s):

Host Institution				Dillard Equivalent				Course Program Approval Signature
	Course				Course			
	Number	Name	Hrs		Number	Name	Hrs	
Ex.	BIO 1100	Intro of Biological Science	3	Ex.	BIO 101	Biological Sciences	3	(Signature of Coordinator of Biology)
1				1				
2				2				
3				3				

Approved:

_____ _____
Student **Date** **Advisor** **Date**

_____ _____
Program Coordinator **Date** **School Chair** **Date**

_____
Academic Affairs **Date**

This document serves as authorization for the above student to enroll at your institution as a non-matriculating student in the course(s) and year/term stated above.

_____ _____
Registrar Date