REQUEST FOR APPROVAL OF TRANSFER CREDIT

Student Name: _____ **WID:** _____ **Advisor(s):** _____ **Today's Date:** _____

Major(s): _____ □ **Undeclared?** **Anticipated Whitman Graduation Date:** _____

College/University to Attend: _____ **Location (state & city):** _____ **Dates to attend (m/yy-m/yy):** _____

Term in which to attend: **Taking Courses:** □ While on Leave **Type of term:*** □ Quarter □ Semester
□ Fall   □ Spring   □ While taking Whitman classes **Type of courses:** □ On Campus □ Online

□ Summer   □ Other: _____

***Note on Term Types & Credits Awarded**: 1 quarter-system credit is equal to 2/3 of a semester credit. For example: a 5-credit quarter course may transfer for 3-credit semester credits, and a 4-credit quarter course for 2 semester credits. Whitman does not accept partial credit.

Course Information		Number of Credits Awarded at Transfer College*	Desired Outcome	Registrar's Office	
Dept & Course #: ex: HUM 205	**Course Title:** ex: Religion, Violence, and Peace: Patterns Across Time and Tradition		**Major/Minor Credit, Course Equivalency, Distribution, or General Degree Credit** ex: MATH-125, lower-level Politics, Art Elective, CP (Cultural Pluralism), HU (Humanities), FI (Fine Arts), SO (Social Sciences), QU (Quantitative Analysis), SC (Science), SCL (Science with a Lab), etc.	**Approved**	**Not Transferable**

CREDIT LIMITS: No more than 1/3 of required Major credits and **2/5 of Minor credits** may be earned through transfer credit, however some departments set more restrictive limits. See each department's section of the Whitman College Catalog for details. Other transfer credit limits: 70 overall; 62 from 2-year institutions.

Advisor Signature _____ **Date** _____ **Dept. Chair Signature** _____ **Date** _____

Approving Transfer Credit/Courses as Specified Above (Required)   Approving Transfer Credit/Courses as Specified Above (Required for Minor Credit)

> ***Before completing this form, please also review the material available through the Transfer Credit Information link on the Registrar's Office website. Your signature on this form indicates you have read and understand the rules and guidelines pertaining to transferring coursework to Whitman College. Please contact the Registrar's Office if you have any questions or concerns.***

By signing below I indicated I have read and understood the above box   **Student Signature:** _____

(Required)

*Upon completion of the course, it is the student's responsibility to have an official transcript sent to: Whitman College, Registrar's Office, 345 Boyer Ave, Walla Walla WA 99362. eTranscripts can be sent to Pam Fowler, Transfer Credit Evaluator, at fowlerpa@whitman.edu**

Registrar's Notes: