

Request for Non-College of Social Work Graduate Credit

Student Name _____ ID# _____

____ Pre-Approval requested for course to be taken outside the College of Social Work.

____ Approval requested to transfer credit taken prior to M.S.W. Admittance.¹ Grade Received _____

¹Only courses taken **within the past three years** can be considered.

Department _____ Course No. _____ Cr.Hrs. _____

Course Title _____

Institution _____ Semester and Year taken _____

Course credit applied towards another degree: YES NO Letter Grade Given: YES NO

This Graduate Credit Request is submitted for the purpose of fulfilling the M.S.W. elective credit: YES NO

Relevance to Educational Goals _____

Attachment: Course Syllabus

Student Signature Date M.S.W. Director Approval Date