

REQUEST FOR  
**TRANSFER COURSE PRE-APPROVAL**

Please print legibly. The information below is required for student notification and will be used for mailing.

► **STUDENT INFORMATION**

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

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Maryville email address: \_\_\_\_\_

\_\_\_\_\_ or \_\_\_\_\_  
Maryville student ID Social security number

Student level (check one):

Freshman  Sophomore  Junior  Senior

Transfer course to substitute for Maryville requirement in (check one):

Major  Minor  General Education  Other \_\_\_\_\_

► **INSTRUCTIONS and GUIDELINES**

1. To insure applicability to a student's degree plan and academic program, a course taken at another institution for transfer to Maryville must be approved prior to beginning the course.
2. A Maryville degree requires that students complete the last 30 credit hours at Maryville and requires that 60 credit hours are completed at a four year institution. Exceptions to these requirements may be requested using a Petition for Exemption to Academic Policy available in the VPASA office located in Gander Hall Room 137.
3. Return the approved Transfer Course Pre-Approval form to the Maryville Registrar's Office (see inquiry information below) prior to beginning the transfer course.
4. After completing the pre-approved transfer course, the student must request an official transcript from the institution to complete the transfer of credit to Maryville. The official transcript should be directed to the Maryville Registrar's Office (see inquiry information below).

► **TRANSFER COURSE INFORMATION**

Name of institution: \_\_\_\_\_

Location of institution: \_\_\_\_\_

Institution's Course title: \_\_\_\_\_

Institution's course prefix: \_\_\_\_\_ Institution's course number: \_\_\_\_\_ Credit hours: \_\_\_\_\_

Brief description of transfer course:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

► **MARYVILLE COURSE INFORMATION** (transfer course to substitute for this Maryville course)

Maryville course title: \_\_\_\_\_

Maryville course prefix: \_\_\_\_\_ Maryville course number: \_\_\_\_\_ Credit hours: \_\_\_\_\_

Reason for Transfer Course Pre-Approval request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

► **APPROVALS**

Adviser: \_\_\_\_\_ Date: \_\_\_\_\_  
(signature required)

Dean: \_\_\_\_\_ Date: \_\_\_\_\_  
(signature required)

**Direct inquiries to:**

Maryville University Registrar's Office  
138 Gander Hall  
13550 Conway Road  
St. Louis, MO 63141

registrar@maryville.edu  
Telephone: (314) 529-9370  
Fax: (314) 529-9925

10/03

For Registrar's Office Use

Student notification by:  email  mail

\_\_\_\_\_ date \_\_\_\_\_ initials