



SAINT MICHAEL'S COLLEGE  
 Office of the Registrar  
 One Winooski Park  
 Colchester, Vermont 05439  
 Telephone: (802) 654-2571  
 Fax: (802) 654-2690

# REQUEST FOR TRANSFER CREDIT PERMISSION

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student ID #: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

Current Major: \_\_\_\_\_ Current Advisor: \_\_\_\_\_  
Print Name

I seek permission to take the following course(s) during the \_\_\_\_\_ session, \_\_\_\_\_ at  
 (i.e. Fall, Spring, Summer I, Summer II) Year

Name of College or University

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in \_\_\_\_\_, \_\_\_\_\_  
City State

Please fill in all white sections of the table below as indicated. Be sure to list the course number and course name. Please check the box to indicate if this course should count towards your major, your liberal studies requirements or simply as a general elective. **If you would like a course to meet a major or liberal studies requirement, please list the specific requirement you would like this course to meet.**

**COURSE(S)**

| Course Number | Course Name | I would like this course to Transfer... |                     |                | *I would like this course to meet the following <u>specific Major or Liberal Studies</u> requirement. | For Office Use Only: |
|---------------|-------------|---|---------------------|----------------|---|----------------------|
|               |             | In My Major*                            | As Liberal Studies* | As An Elective |   |                      |
|               |             |   |                     |                |   |                      |
|               |             |   |                     |                |   |                      |
|               |             |   |                     |                |   |                      |

DEPARTMENT CHAIR: \_\_\_\_\_  
Signature

***CHAIR'S SIGNATURE IS REQUIRED ONLY IF ONE OR MORE COURSES ARE IN YOUR MAJOR.***

REGISTRAR: \_\_\_\_\_  
Signature

**\*\*\*\*BEFORE APPROVAL WILL BE GRANTED, YOU MUST ATTACH A COURSE DESCRIPTION FOR EACH COURSE THAT YOU WISH TO TAKE.**

**CREDIT MAY BE GRANTED FOR A MAXIMUM OF SIX (6) CREDITS PER SESSION FOR COURSES WITH A GRADE OF C- OR BETTER.**

**IT IS RECOMMENDED THAT JUNIORS AND SENIORS NOT TAKE COURSES IN JUNIOR OR COMMUNITY COLLEGES.**

**PLEASE RETURN THE COMPLETED FORM TO THE REGISTRAR'S OFFICE, FOUNDERS 112.**