

TO: Associate Dean

PAGES: _____

DATE: _____

	Fax	Mail Stop	Department Contact Email
AHT	4376	ATC 10	christi.nielsen@utdallas.edu
BBS	2491	GR 41	lbarfield@utdallas.edu
ECS	6845	EC34	crynes@utdallas.edu
EPPS	N/A	GR 31	deniseboots@utdallas.edu
IS	2440	HH 30	twissin@utdallas.edu
MGT	N/A	SM 20	jsomugdean@utdallas.edu
NSM	2862	CB 10	anoja.jeyakumar@utdallas.edu

Transfer Credit Earned Prior to Attending UT Dallas

From: _____ School: _____ AHT _____ BBS _____ ECS _____ EPPS _____ IS _____ MGT _____ NSM

Fax: _____ Voice: _____ Mail Stop: _____

RE: _____ STUDENT ID# / NETID: _____
STUDENT's NAME (LAST NAME, FIRST NAME, MI) _____

REQUEST FOR:	Course Number	Course Title	# of Credit Hours
Taken at:	Institution	Location	
During:	fall	spring	summer
			other
			Description
			in _____ Year _____

Transfer as: _____ and/or to satisfy _____ degree requirement

CORE DESIGNATION:	<input type="checkbox"/> 010 Communication	<input type="checkbox"/> 020 Mathematics	<input type="checkbox"/> 030 Life and Physical Sciences	<input type="checkbox"/> 040 Language, Philosophy and Culture
	<input type="checkbox"/> 050 Creative Arts	<input type="checkbox"/> 060 American History	<input type="checkbox"/> 070 Government/Political Science	<input type="checkbox"/> 080 Social and Behavioral Sciences
	<input type="checkbox"/> 090 Component Area Option			

Supporting Materials Attached: Course Description Syllabus Other _____ Description _____

ASSOCIATE DEAN RESPONSE: APPROVED CORE DESIGNATION NOT APPROVED *

Associate Dean

Date

Update Transfer Articulation Table?

YES

NO

* Reason: