

REQUEST FOR ENROLLMENT AT ANOTHER UNIVERSITY



I. STUDENT INFORMATION

Student Name: _____ Student ID: _____

Current Major(s): _____ Anticipated Graduation Date: _____
Month Year

II. EXTERNAL INSTITUTION INFORMATION

Institution Name: _____

Proposed Date to Attend: Year: _____ Semester: Interession Summer Spring Fall

III. COURSE INFORMATION

Indicate the other institution's course you plan to take					Wesleyan's Course Equivalency			Transcript Evaluator Use Only			
Course Title (College Algebra)	Course Prefix (MATH)	Course Number (1314)	Credits (3)	Course Type (Check box)	Counts Toward (Check all that apply)	Equivalent		Approved	Previously Taken	Notified Student	
						Course Prefix (MAT)	Course Number (1302)				
				<input type="checkbox"/> Face-to-face <input type="checkbox"/> Online	<input type="checkbox"/> GEC <input type="checkbox"/> Major	<input type="checkbox"/> Minor <input type="checkbox"/> Elective			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Face-to-face <input type="checkbox"/> Online	<input type="checkbox"/> GEC <input type="checkbox"/> Major	<input type="checkbox"/> Minor <input type="checkbox"/> Elective			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Face-to-face <input type="checkbox"/> Online	<input type="checkbox"/> GEC <input type="checkbox"/> Major	<input type="checkbox"/> Minor <input type="checkbox"/> Elective			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Face-to-face <input type="checkbox"/> Online	<input type="checkbox"/> GEC <input type="checkbox"/> Major	<input type="checkbox"/> Minor <input type="checkbox"/> Elective			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Face-to-face <input type="checkbox"/> Online	<input type="checkbox"/> GEC <input type="checkbox"/> Major	<input type="checkbox"/> Minor <input type="checkbox"/> Elective			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Face-to-face <input type="checkbox"/> Online	<input type="checkbox"/> GEC <input type="checkbox"/> Major	<input type="checkbox"/> Minor <input type="checkbox"/> Elective			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

IV. REQUIRED SIGNATURE

Student Signature: _____ Date: _____

V. APPROVAL SIGNATURE (International program signature required for international students; permission must be obtained before approval from advisor)

International Program Signature: _____ Date: _____
(If applicable)

Academic Advisor Signature: _____ Date: _____

Dean Signature: _____ Date: _____
(Of school in which major resides)

If you are sponsored by an outside agency, approval of this form does not guarantee acceptance by a third party, only transfer of coursework into Texas Wesleyan and toward degree requirements.

For Office of Student Records Use Only

Processed by: _____ Date: _____