Peace and Conflict Studies

VALIDATION OF TRANSFER CREDIT

Complete one form for each course. Please print or write neatly. Please submit completed form and documentation to Trotter 107.

Date Submitted _______________________

Student’s Name ____________________________________________________________

Student’s E-mail Address: ________________________  Class Year ____________

Course Title ____________________________________________________________________

Institution ___________________________________________________________________

City/Country ___________________________________________________________________

Start Date ___________________  Completion Date _______________________

Number of Weeks ____________  # Class Hours Per Week _______________________

CREDITS REQUESTED: _________

DOCUMENTS SUBMITTED:

_____ Transcript  _____ Syllabus  _____ Exams  ____ Writing Assignments

_____ Reading List  _____ Other

Note: If no syllabus was given, please submit one reconstructed from notes (or memory) describing the material covered, supplementary readings, and any projects you completed.

FOR OFFICE USE ONLY:

Date Approved: ______________

Peace and Conflict Studies Credit(s) ______________

Signature ___________________________________________________________________

Comment: ___________________________________________________________________

Peace and Conflict Studies will submit this form, signed by the Coordinator, to the Registrar and transfer credit(s) will then be recorded on your transcript.

Rev. 2/23/12