SWARTHMORE COLLEGE
DEPARTMENT OF HISTORY

VALIDATION OF TRANSFER CREDIT

Fill out one form for each course.

Name of Student: ________________________________  Class: _____

Course for which credit is requested:

Sponsoring Institution: ________________________________

Course number and title: ____________________________

Instructor: ____________________________  When course taken: __________

How many weeks and how many hours per week: ________________

How many credits requested: ____________________________

Have you taken a history course at Swarthmore? ______

Which course did you take? ____________________________

How would you evaluate the level of difficulty of this course?  a) more difficult,  b) less difficult,  c) about the same,  d) difficult to judge.  Explain: ________________

Equivalent course at Swarthmore (if any): ____________________________

Documents submitted (check):

Copy of Transcript (required) ________  Syllabus ________

Reading List ________  Lecture Notes ________

Examinations ________  Term Paper(s) ________

Others (specify) ________

Title of the major paper: ____________________________

If no syllabus was given in class, please submit one reconstructed from your notes (or memory), describing the material covered in the course, supplementary readings, or any project you completed for the course.

APPROVAL: Credit ________  Waiver ________

Date: __________  Chair’s Signature: ____________________________

FACULTY COMMENTS (Please write a full evaluation of the course and students performance):

______________________________
In order to have the transfer credit recorded on the transcript, this form, signed by the Chair, must be submitted to the Registrar with the transcript from the institution at which the work was done.