

**Department of Chemistry and Biochemistry  
Swarthmore College**

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Submission Date

\_\_\_\_\_  
Student email address

\_\_\_\_\_  
Class Year

**COURSE INFORMATION FOR WHICH CREDIT IS REQUESTED:**

Course Title: \_\_\_\_\_

Institution: \_\_\_\_\_

City/Country: \_\_\_\_\_

Start Date: \_\_\_\_\_

Date of Completion \_\_\_\_\_

Number of Weeks: \_\_\_\_\_

# Class Hours Per Week: \_\_\_\_\_

# Lab Hours Per Week: \_\_\_\_\_

TOTAL NUMBER OF CLASS HOURS: \_\_\_\_\_

Number of Chemistry Credits Requested: \_\_\_\_\_

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**FOR DEPARTMENT USE ONLY:**

Date Approved: \_\_\_\_\_ Signature of Faculty member designated by the Chair \_\_\_\_\_

Equivalent course at Swarthmore (if any): \_\_\_\_\_

# of Credits being approved: \_\_\_\_\_

Comment: \_\_\_\_\_

\_\_\_\_\_  
Each course within the department has different faculty members designated by the Chair for consideration of chemistry coursework not taken at Swarthmore. See <http://www.swarthmore.edu/academics/chemistry-and-biochemistry/courses/transfer-credit.xml> for the name of the appropriate faculty member. After completion of this form the Department of Chemistry and Biochemistry will submit this form to the Registrar to have the transfer credit(s) recorded on your transcript.