

Application To Take Courses At Another Institution
Instructions and Procedures Checklist

I. Signatures

- Go to each department in which the course that you are substituting is offered and obtain a signature from the appropriate individual to determine whether or not the course is equivalent.
- Obtain the signature of your Department Chair.
- Obtain the signature of your Dean.
- Obtain the signature of the Assistant Provost if you are a senior and/or the course you want to take away from HU during the Fall or Spring semester is offered at HU during that semester.

II. Documentation that must accompany the form:

- A detailed description of the course.
- Information on the university's accreditation.
- Information on whether the university is on a semester or quarter system.
- A letter of justification for taking the course(s) away if:
 - a) you have less than 30 hours of coursework to complete at HU.
 - b) the course you want to take away from HU during the Fall or Spring semester is offered at HU during that semester.

Additional information may be required in order to process your application.

III. Important notes:

1. The Office of the Registrar makes the **final** determination of course approval.
2. Students **cannot** receive transfer credit for on-line courses.
3. Transfer course credit will **not** be approved retroactively.
4. Only those courses receiving prior approval will be accepted for transfer credit.
5. Students in good academic standing can take no more than nine (9) credit hours away from the institution during the summer.
6. The student is responsible for ensuring that the required signatures are obtained and that the application is forwarded to the Office of the Registrar for processing.

Each Course must be approved by the chairperson, or designee, of the HU department offering the course

**HAMPTON UNIVERSITY
HAMPTON, VIRGINIA**

Date _____

APPLICATION TO TAKE COURSES AT ANOTHER INSTITUTION

NAME _____ STUDENT ID NUMBER _____ CLASSIFICATION _____ MAJOR _____

ADDRESS _____;
(Campus or Local) (Street, City, State, Zip) (Permanent or Home) (Street, City, State, Zip); (Phone - Area Code and Number)

I wish to apply for permission to take the following course(s) at** _____ (College or University) (City, State, Zip)
during the 20__ Summer Session or the _____ semester of the 20__ - 20__ academic year. My anticipated graduation date is _____.

Other School			
Page Number	Course Number	Course Title	Credit Hours

Hampton University				
Page Number	Course Number	Course Title	Credit Hours	Course Chairperson Signature

***Are you in your last 30 hours at Hampton University? YES ___ NO ___ (See Below) ***

***Is this course being offered at Hampton University? YES ___ NO ___ (See Below) ***

*** ONLY GRADES OF "C" OR BETTER ARE ACCEPTED AS TRANSFER CREDIT. QUALITY POINTS ARE NOT TRANSFERRED.**

**** A CATALOG OF THE OTHER COLLEGE OR UNIVERSITY MUST BE SUBMITTED WITH THIS APPLICATION.**

() Approved _____ Date _____ () Approved _____ Date _____
 () Not Approved _____ Date _____ () Not Approved _____ Date _____
 Department Chairperson (OF MAJOR) School Dean (OF MAJOR)
 () Approved _____
 () Not Approved _____ Date _____
 Assistant Provost (If Necessary) ***

*****This request requires the Assistant Provost's signature if the student is seeking permission to take a course at another institution during the semester when that same course is being offered at HU and/or if you have less than 30 hours of coursework to complete at HU.**

IT IS THE STUDENT'S RESPONSIBILITY TO REQUEST THAT AN OFFICIAL TRANSCRIPT BE MAILED TO HAMPTON UNIVERSITY'S REGISTRAR.
PLESAE NOTE: NO ONLINE COURSES ARE ACCEPTED