

PETITION FOR APPROVAL OF TRANSFER CREDITS

****Please Complete Entire form before submitting to the appropriate Department****

Please Submit a Separate Form to Each Department.

NOTE: Student must be admitted and enrolled.

Name: _____ PID#: _____ Date: ____/____/____

Email Address: _____ Telephone #(____) _____

CSU-Pueblo Major _____ CSU-Pueblo Minor _____

*******Please select ALL of the following that may apply to your petition*******

- ☐ This form is submitted to petition **General Education Credit** for course(s) **(2.7 semester credits or more)** accepted in transfer, but General Education Credit was not granted. (Student has attached course syllabus)
- ☐ This form is submitted to petition for **Credit Not Initially Accepted in Transfer**. The evaluator was not able to determine the transferability of this/these courses. (Student has attached course syllabus)
- ☐ This form is submitted to petition for **Credit From a Non-Regionally Accredited Institution**.
*** *I understand that in order to petition for credit, I am required to have **completed** at one full-time semester at CSU-Pueblo with a GPA of 2.0 or better* *** (Student has attached course syllabus)
- ☐ This form is submitted to petition for the approval of **Major and/or Elective Credit** earned more than 10 years before admission to CSU-Pueblo. *** ***DO NOT*** use this form to petition credit that is more than 10 years old that is already recorded on your CSU-Pueblo transcript. Please obtain the appropriate form from the Registrar's Office. *** (Student has attached course syllabus or course catalog description.)

***** Courses that are NOT marked "Only For This Student" will be transferred in as a general rule for all other students. This excludes courses that are being petitioned under the 10 year rule & non-regional institutions*****

Once all signatures are obtained, submit to REGISTRAR'S office.

Institution Attended: _____

CSU-Pueblo Equivalent

Dept:/ Course #	Title:	Dept:/Course #:	Title:	Gen Ed Area:	Only for this Student
____/____	_____	____/____	_____	_____	<input type="checkbox"/>
____/____	_____	____/____	_____	_____	<input type="checkbox"/>
____/____	_____	____/____	_____	_____	<input type="checkbox"/>
____/____	_____	____/____	_____	_____	<input type="checkbox"/>
____/____	_____	____/____	_____	_____	<input type="checkbox"/>

Dept. Chair signature: _____ Date: ____/____/____

☐ Approved
☐ Disapproved

Dept. Chair Print name: _____

***Note:** *Only grades of a C- or above will be accepted. Submit a petition form to each Department Chair for major and/or elective credits from which you are requesting approval. Attach an unofficial copy of your transcript and highlight the courses that are being petitioned, attach syllabus or catalog description.*

Rev. 2/2020