

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY
PETITION TO TAKE COURSES AT OTHER INSTITUTIONS

Name: _____ ERAU Box: _____

ID#: _____ Program: _____

Mailing address: _____

I hereby petition for approval to take the following course(s) at the school listed below.

Name of School _____ Location _____ City _____ State _____

Semester I Will attend Above School _____

Reason for request: _____

List exact course number and attach course description. Have any of these courses been taken previously at ERAU? _____

REQUESTED COURSE (S)

TRANSFER COURSE	ERAU COURSE	EQUIVALENCY APPROVED	REVIEWED BY Records Office Staff
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I understand:

- A maximum of 18 hours may be taken elsewhere after my initial enrollment at ERAU.
- Approval noted above is only for the specific school and courses(s) listed.
- Courses taken at another institution **will not** replace the grade of a course completed at ERAU.
- All transfer credit policies still apply.
- The last thirty (30) hours toward a degree must be completed in residence.
- Residential students may **NOT** co-enroll at a local institution without prior written permission.
- Official transcripts must be sent directly to ERAU by the institution attended to receive credit.
- **Please return this form to the Records Office for review and verification.**

I have read and understand the above policy.

Student Signature Date

*******FOR OFFICIAL USE ONLY*******

_____ CUM GPA ERAU	_____ Hrs earned ERAU	_____ Hrs remaining in degree	_____ Hrs currently enrolled	_____ Verified by date/initial
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Exceptions to these policies must be approved by the Dean of the student's college.

() last thirty hours in residence () co-enrollment at local institution () retroactive petition to accept prior enrollment

Dean or Associate Dean: Approved _____ Disapproved _____

Signature Date
