Appendix B : CE Petition: Course Transfer

INSTRUCTIONS TO THE STUDENT

To ensure adequate breadth and depth in students’ programs, CE has outlined degree requirements, including a core of required courses. If a student has already taken graduate work in some of these required areas and feels that the program requirement would constitute a duplication, the student may petition to substitute his/her previous coursework into his/her program. The student may also petition changes in program requirements other than course substitutions.

It is the responsibility of the student to make sure that the petition form reaches the appropriate professor, the adviser, and the committee. The student should complete the petition form.

The procedure for petitioning a change in course requirements is as follows*:

1. First, meet with the professor who is teaching the course in question in order to ascertain if there would be duplication. Have him/her sign this form.

2. Next, the student will meet with her/his adviser to determine if s/he will permit the substitution. Have him/her sign this form.

3. Submit a petition to Lori Boucher, DGS Assistant.
CE PETITION FORM: COURSE TRANSFER

Student’s Name _________________________ E-mail ____________@umn.edu
Date ______________

CE Status (check one):   Ph.D. _____   M.A. _____

Will this change effect GPAS:   Yes / No

   If this changes your approved GPAS: e-mail the DGS Assistant.

Is this petition for the purpose of course substitution? If so, the professor whose course you are substituting must sign below:

From the Student:
Rationale for Course Substitution:

From the Professor:
I have reviewed the rationale for the proposed course change and approve it. It is my belief that the student has already acquired the knowledge and/or skills that are taught in my course, ______ __________________________ (course # and designator) and the substitution of ______________ ________ (course # and designator) is sufficient.

Professor’s signature ___________________________ Date ______________

From the Adviser: I have reviewed the above rationale as stated by the student and as approved by the above-named professor, and I am in agreement with the proposed change.

Adviser’s signature ___________________________ Date ______________