## THE COLLEGE OF LIBERAL ARTS & SCIENCES BUTLER UNIVERSITY

## **Transfer Credit Application for LAS STUDENTS for non-Core Courses**

(For students whose primary majors are in the College of Liberal Arts and Sciences only)

Name_		ID No.			
Last	First		MI		
Home Address			Local Address		
City	State	Zip	City		State Zip
			Local phone		
	rses specified be		he understanding that pro S and/or undergraduate re	_	
REQUESTED COURSES:		□semester □quarter	BUTLER CORE EQUIVAL	ENT:	DEPT. APPROVAL:
1. (Dept. – Number – Title)	Credit Hrs.	□ other □ semester □ quarter □ other	(Dept. – Number – Title)	Credit Hrs.	Initials
2. (Dept. – Number – Title) 3	Credit Hrs.	□ semester □ quarter □ other	(Dept. – Number – Title)	Credit Hrs.	Initials
(Dept. – Number – Title)	Credit Hrs.	□semester □quarter □other	(Dept. – Number – Title)	Credit Hrs.	Initials
4(Dept. – Number – Title) 5	Credit Hrs.		(Dept. – Number – Title)	Credit Hrs.	Initials
(Dept. – Number – Title)	Credit Hrs.		(Dept. – Number – Title)	Credit Hrs.	Initials
List any courses that will  Student Signature		ne:  Advisor Signa	ture	LAS Dean's	Signature
NOTE: Please return	the completed form	to the Office	of the Dean of the College of 1	Liberal Arts and	Sciences for approval.

Please return the completed form to the Office of the Dean of the College of Liberal Arts and Sciences for approval Copies of the approved request form will be distributed to: 1) the Registration and Records office; 2) your advisor; and 3) your file in LAS; the original will be returned to you.

Please have an official transcript mailed to the Office of Registration and Records, Butler University, 4600 Sunset Avenue, Indianapolis, IN 46208, upon completion of the course(s).