UNIVERSITY OF ARKANSAS

College of Agricultural, Food, and Life Sciences

PETITION TO TAKE COURSEWORK AT ANOTHER INSTITUTION

NameE-Mail Address		I.D	
		Advisor	
Major (oncentration	
Name of O	ff-Campus Institution		
City			
Semester			
to be taken	University of Arkansas Course:	Off-Campus Equivalent Course:	
	1) Course Number Course Name	Course Number Course Name	
	Course Name Course Name	Course Number Course Name	
	2) Course Number Course Name	Course Number Course Name	
	Course Number Course Name	Course Number Course Name	
	3) Course Number Course Name	Course Number Course Name	
	Course Number Course Name	Course Number Course Name	
https://www2. To have credi	the Off-campus Equivalencies, please see the Transark.edu/web-apps/regr/courseequiv/Main. t added to your academic record, you must obtain to the Registrar's Office (HUNT 146).	in a grade of "C" or better in the course(s) and have an official	
Only credit tra	ansfers. Grades do not transfer, and they will no	t be computed into your U of A cumulative GPA.	
No developme	ental or remedial work will transfer.		
Students may	not earn more than 12 of their last 30 hours at an	other accredited institution.	
Student's Signature		Date	
Advisor's Signature		Date	
Dean's Office Ap	proval	 Date	

Please return to the AFLS Dean's Office AFLS E-108