THIEL COLLEGE

APPROVAL OF SUMMER COURSE(S)

Student Name: ________________________________  Student ID: _________________

Major: ________________________________  Summer: ____________________

I am requesting to take a class at ________________________________________________

Name of School

for transfer of credits toward the Bachelor of Arts/Science Degree. I am seeking approval for the following courses:

<table>
<thead>
<tr>
<th>Course # and Dept.</th>
<th>Specific Course Title</th>
<th>C.H.</th>
<th>Thiel Equivalent</th>
<th>Apply as Major/Core/Elective</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note to Student: Students must earn a grade of C- or higher for the course credits to transfer. For acceptance of these courses toward the degree, the official transcript must come directly from the school in which the courses are taken to the Registrars Office at Thiel College immediately after the completion of the courses.

Student Signature ___________________________  Date ________________

Approved by:

__________________________  Date ________________
Academic Advisor

__________________________  Date ________________
*Department Chairperson

__________________________  Date ________________
Registrar

*Department chair signature is required for courses in your major.