

UNIVERSITY OF CALIFORNIA, RIVERSIDE

REQUEST CREDIT FOR NON-UCR CONCURRENT COURSES COLLEGE OF HUMANITIES, ARTS, AND SOCIAL SCIENCES

This petition must be approved **prior to enrollment**. Valid reasons are required to enroll in course(s) at another institution while also enrolled at UCR. **Please print this form and submit at the college office.** Form **NOT** needed for Summer Session courses. **You must stop by the College office to learn of our decision.**

Year and Quarter course(s) are to be taken: Fall _____ Winter _____ Spring _____

Last Name First Name Student ID# Major

Local Address (Street, City, Zip Code) UCR Webmail Phone Number

Student: Reason for requesting concurrent enrollment:

Student's Signature Date

Academic Advisor Notes:

Advisor's Signature Date

1. _____
Name of School Location

_____ _____
Course Name and Number Units Course Title

_____ _____
Date Course Begins Date Course Ends

2. _____
Name of School Location

_____ _____
Course Name and Number Units Course Title

_____ _____
Date Course Begins Date Course Ends

I understand I must have **OFFICAL TRANSCRIPTS SENT DIRECTLY TO THE OFFICE OF UNDERGRADUATE ADMISSIONS AT UCR** immediately after I have completed the course(s) listed above. Transferability and unit value of courses will be determined by Admissions upon receipt of the transcript.

Dean: Approved _____ **Denied** _____

Reason: