

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. 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 (mm/dd/yyyy)** _____

Academic Advisor Notes:

Advisor's Signature _____ **Date (mm/dd/yyyy)** _____

1. _____
Name of School _____
Location _____

Course Name and Number	Units	Course Title
------------------------	-------	--------------

Date Course Begins (mm/dd/yyyy) _____ Date Course Ends (mm/dd/yyyy) _____

2. _____
Name of School _____
Location _____

Course Name and Number	Units	Course Title
------------------------	-------	--------------

Date Course Begins (mm/dd/yyyy) _____ Date Course Ends (mm/dd/yyyy) _____

I understand I must have **OFFICIAL 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: