

## Transfer of Credit Request

Advance Permission Required. The Dean of Students must grant permission for a student to earn credit at another law school and must pre-approve courses. Do not pay a deposit or make and other commitments to a program until you have received a response to your request. An official transcript must be sent to Mitchell Hamline in order to receive credit. Grades are listed on your MHS� transcript, but are not calculated into your cumulative GPA. Credit is granted only when a grade of at least C (not C-) or its equivalent is earned. Courses must be letter-graded.

Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Current Program: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of law school you will attend: \_\_\_\_\_ ABA approved: \_\_\_\_\_

Semester: \_\_\_\_\_ Dates attending: \_\_\_\_\_ to \_\_\_\_\_

Do you plan to attend MHS� during the same term, or will the dates of the course overlap with any portion of a Mitchell Hamline session in which you are enrolled?  YES  NO

If yes, you must first obtain advance permission from the Vice Dean for Academic and Faculty Affairs.

Students are limited to 15 credits earned through visiting away and 7 credits earned visiting away during summer and JTerm.

Total cumulative credits earned and proposed through visiting away: \_\_\_\_\_ During J-Term and summer sessions: \_\_\_\_\_

List proposed courses below and attach course descriptions. Transfer credit will not be considered without course descriptions.

Course Name	Course Number	Credits	Grade Mode	Classification*

\*Choose one or more of the following classifications for each course: study abroad, online, elective, and/or experiential. Required courses must be taken at MHS�. Online courses taken at other schools are counted against the ABA-mandated limit on distance education credits.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Electronic signatures can be accepted only if form is sent through the Mitchell Hamline email system* **Return completed form to the Registrar's Office (registrar@mitchellhamline.edu).**

### Office use only

Total credits approved for transfer: \_\_\_\_\_

Dean of Students signature: \_\_\_\_\_ Date: \_\_\_\_\_

If course dates/session overlaps: Vice Dean Signature: : \_\_\_\_\_ Date: \_\_\_\_\_

If Blended Program Student:

Associate Dean of Academic Affairs : \_\_\_\_\_ Date: \_\_\_\_\_