**TRANSFER COURSE EXCEPTIONS for Degree Works**

**For the B.S. IN BIOLOGICAL SCIENCES, Department of Ecology**

**Please Print**

NAME OF TRANSFER STUDENT ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF FACULTY ADVISOR­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_

Notes: Courses determined as equivalent by the Office of Admissions do not need to be listed.

The department may not waive a CORE course designation. A CERC petition is required.

A combination of courses may be determined to meet the required course.

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| **OPTION’S REQUIRED COURSE** | | **TRANSFER OR ALLOWED COURSE** | |
| RUBRIC | COURSE TITLE | RUBRIC | COURSE TITLE |
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I have reviewed the course(s) listed above and have determined that the transferred course(s) are equivalent or are approved to meet the **department** course requirement(s) for the student above.

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Signature of faculty advisor

Please submit this form immediately to the Exceptions Manager for Degree Works for accurate entry for the audit for graduation. Thanks!

Judy Van Andel  
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