



PROVIDENCE
COLLEGE

OFFICE OF THE DEAN OF UNDERGRADUATE STUDIES

COURSE APPROVAL

STUDENT

Name: _____ Banner ID: _____

Major: _____ Minor: _____

Email: _____ Class Year: _____

College Attending: _____ Semester/YR: _____

COURSE INFORMATION IS TO BE COMPLETED BY DEAN'S OFFICE STAFF ONLY.

| COURSE TITLE & NUMBER | PC Course Equivalent/Requirement | Credit Hours |
|-----------------------|----------------------------------|--------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| TOTAL CREDIT HOURS | | |

**Courses applied toward major/minor requirements must be approved by your Department Chair/Program Director.*

DEPARTMENT CHAIR/PROGRAM DIRECTOR

I approve the above course(s) to be used towards major/minor requirement(s).

Chair/Director Signature: _____ Date: _____

STUDENT AGREEMENT

I understand and agree to the following:

- 1. I understand that the above courses are permitted for make-up or enrichment only and are not intended to advance my status. I further understand that I am bound by the College's graduation requirement of 8 semesters of residence.**
2. I understand that only grades of "C" or better are acceptable from courses taken outside of Providence College. Grades from transfer courses will be entered onto the Providence College transcript with a "T" and will not affect the Providence College GPA.
3. I understand that it is my responsibility to arrange for official transcripts of course work taken outside of Providence College to be sent to the Providence College, Enrollment Services, Harkins Hall 207, Providence, RI 02918.

Student Signature: _____ Date: _____

OFFICE OF THE DEAN

Dean Signature: _____ Date: _____