**PETITION TO TRANSFER COURSE CREDIT**

**APPLICANT:**

Please attach a copy of the course description, syllabus and/or reading list. If you did not submit an official transcript for this course with admission materials, please attach it as well.

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Title</th>
<th>Grade</th>
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Applicant’s name (please print): __________________________________________

Applicant’s ID (99) number: ___________________________

Mailing address: ____________________________________________

____________________________________________

Name of Institution

**SEQUENCE CHAIR:**

I approve the above course for transfer credit. (yes) (no)

If yes, equivalent SSW Course Title and Number:

_________________________________________ ________________________________

Sequence Chair: _____________________________________    _____________________

(signature)                                                                    (date)

**REGISTRAR:**

The Registrar’s signature will certify that the courses listed above received a grade of B or better at an accredited graduate school of social work.

Quarter hour equivalent of courses approved = ___________

Registrar:___________________________________________    _____________________

(signature)                                                                                 (date)

Send materials by the deadline to:
Office of Academic Support Services
Smith College School for Social Work
Lilly Hall, Northampton, MA 01063

Deadline: April 1st (or one week after acceptance for entering students)