

Quarter Hour Deficiencies/Semester Equivalencies

Form Purpose: The purpose of this form is to identify and consider credit for prerequisite courses taken under quarter-hour systems in light of semester credit hour requirements. It must be initiated by the matriculating student.

Instructions to the Applicant: Complete Part A and attach an unofficial transcript for the course identified, a course syllabus and/or course description for the course.

Part A. To be completed by the student

NAME: _____ DATE: _____

DATE OF BIRTH: _____ STUDENT ID# (optional): _____

UTHSCSA PROGRAM/SCHOOL: _____ ENTRY TERM: _____

I am requesting credit for one of the prerequisite courses required for admission based on quarter credit earned from a previous institution.

GENERAL PREREQUISITE FOR WHICH CREDIT IS SOUGHT (i.e. Biochemistry; English; Organic Chemistry):

PREREQUISITE COURSE (LIST COURSE NUMBER AND NAME):

UNIVERSITY ATTENDED: _____

QUARTER CREDIT HOURS EARNED: _____

SEMESTER CREDIT HOURS DEFICIENT: _____

MATRICULATING STUDENT SIGNATURE: _____

Part B. To be completed by the designated administrators

Part B-1. (Office of the Dean)

Associate Dean, approve or decline the course and associated credit listed above and sign.

Approve

Decline

SIGNATURE: _____

*Approval granted for the class entering _____
Year

Part B-2. (Office of the University Registrar)

STUDENT ID: _____

***Associate Registrar**, approve or decline the course and associated credit listed above and sign.

***NOTE:** Matriculant must receive a copy of this form and be advised of any remaining deficiencies in this or any other subject.)

Approve

Decline

SIGNATURE: _____