



The University of the District of Columbia
David A. Clarke School of Law
Learning Law in the Spirit of Public Interest

Office of the Registrar
 4200 Connecticut Avenue NW
 Building 38, 2nd Floor
 Washington, D.C. 20008
 202-274-7348
 www.law.udc.edu

Permission to Take Courses for Transfer Credit

STUDENT

Name _____ SSN _____ - _____ - _____

Address _____

Phone _____ E-mail _____

INSTITUTION

Institution Name _____

Address _____

Semester _____ From _____ / _____ / _____ To _____ / _____ / _____

Name of Course	Semester Credits

I request permission to take courses for credit to be transferred to the University of the District of Columbia David A. Clarke School of Law. I have attached to this form an official course description for each course requested. I have read and understand the provisions of Section 3.10 of the *UDC-DCSL Student Handbook* regarding the administration of transfer credits.

Signature _____ Date _____

----- DO NOT WRITE BELOW THIS LINE -----

Action on Request: Approved _____ Denied _____ Modified _____

Comments or Modification _____

Assoc. Dean for Academic Affairs _____ Date _____