

DEPARTMENT OF BIOLOGICAL SCIENCES TRANSFER PETITION FORM

Name _____	Date _____
UB student number _____	
Current or Campus address _____	
e-mail _____	Telephone _____

UB BIO major	BA	BS	Class Standing	Fr	So	Jr	Sr
Other major: _____							

University at Buffalo

course for which you seek credit.

Equivalent transfer course

BIO	Title _____	Course # _____	title _____
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Institution where transfer course was taken: _____

	Checklist
	Copy of course description from transfer institution attached.
	Syllabus of course from transfer institution attached.
	Current DARS report attached.

Office use only

	Approve for _____ credits	Reviewed by _____
	Not approved	Date _____
Comments: _____		