



Name: _____
 Last First

RUID: _____ Class Year _____ E-mail address: _____

Telephone Number _____

 Signature of Student

 Date

(1) Course requested:

Course#	Title	Academic Institution	Credits	Begins	Ends	Online? yes / no

APPROVAL

_____/_____/_____

Date Dean's/Director's Signature

RU Course Equivalent: (Anthropology/Cultural, Humanities, Elective,

Literature, History/Pol Sci/Econ, Sciences, Statistics, Nutrition)

(2) Course requested:

Course#	Title	Academic Institution	Credits	Begins	Ends	Online? yes / no

APPROVAL

_____/_____/_____

Date Dean's/Director's Signature

RU Course Equivalent: (Anthropology/Cultural, Humanities, Elective,

Literature, History/Pol Sci/Econ, Sciences, Statistics, Nutrition)

- Catalog course descriptions or printed screen from NJTransfer should accompany this form.
- Credit will only be granted for courses in which a grade of C or better is earned.
- Credit will only be granted with the dean's office approval
- At the conclusion of the course, it is the student's responsibility to have an official transcript sent to:

Rutgers the State University of New Jersey
 School of Nursing
 Office of Student Services
 180 University Avenue
 Newark, NJ 07102