



Request for Reassignment of Credit for Undergraduate Students From Mason Non-Degree

NAME: _____ GNUMBER: _____

CURRENT MAJOR: _____

Credits Earned at Mason through Non-Degree Studies

Table with 6 columns: SUBJECT, COURSE NUMBER, TITLE, SEMESTER/YEAR, GRADE, CREDITS EARNED. Contains 10 empty rows for data entry.

Total Number of Credits to be applied to Undergraduate level: _____ (18 credits maximum)

____ Approved

____ Not Approved

____ Student's Department Chair

____ Date

____ Student's Dean (Required for more than 18 credits)

____ Date

____ Vice Provost (Required for more than 24 credits)

____ Date

Return completed form to the Office of the Registrar, North Chesapeake Module, Room 1A, or fax to (703) 993-4668.

REGISTRAR'S OFFICE COMPLETION: _____ (Initials) _____ (Date)