



## OUTSIDE PROGRAM CREDIT FORM

Campus		Major/Program	
Last Name		First	Middle
Phone Number ( )		Email Address	
Term/Year <input type="checkbox"/> Fall _____ <input type="checkbox"/> Spring _____ <input type="checkbox"/> Summer _____			
Department			

The above student has successfully completed the following course(s)\*\*:

Course #	Course Name	Credit

Faculty Signature	Date
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\*\* To receive an exemption (with or without credit) for a HUC course, you must complete an EXEMPTION FORM.

ALL FORMS ARE AVAILABLE IN THE REGISTRAR'S OFFICE.