REQUEST TO TAKE COURSE(S) AT ANOTHER LAW SCHOOL FOR GW LAW CREDIT

Name: ___________________________________  Anticipated graduation date: ______________________

I.D.#: ___________________________________  Date of Enrollment at GW Law: ______________________

Full-time: ___ 1L ___ 2L ___ 3L  Part-time: ___ 1L ___ 2L ___ 3L ___ 4L

Have you previously transferred credits for courses taken at another law school?  __ Yes __ No

If yes, how many credits were transferred over? ____

How many CR/NC do you have on record (please be sure to include any classes you are currently enrolled in)? _____

I request permission to take the course(s) listed below for transfer credit in the following term:

Semester:  ___ Summer ___ Fall ___ Spring  Year:  200__

at the following ABA-approved law school (please print school name and address):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Course Title  Credit Hours

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I understand that I must take the course(s) above for a letter or numerical grade but that the course(s) will be evaluated for transfer credit in accordance with GW Law policies pertaining to taking a course on a Credit/No Credit basis. Specifically, I understand that I must earn a grade of C- or better to receive a grade of Credit for the course(s) at GW Law, that the grade(s) will not count in computing my cumulative grade point average, and that the credit hours earned will count toward the total of 17 Credit/No Credit hours a J.D. student may take after the first year.

I agree to advise the GW Law promptly if I do not register for the above course(s). I understand that, in order to receive credit for the course(s), I must insure that the law school at which I take the course(s) sends an official transcript of completed course work as soon as possible to:

Rosanne O’Hara, Director of Student Services
The George Washington University Law School
720 20th Street N.W.
Washington, DC 20052

Signature: ______________________________  Date: ____________

Telephone #: (Home) ______________________  Work: ______________________

E-Mail Address: ____________________________

OFFICE OF STUDENT AFFAIRS/DEAN’S APPROVAL: _____________________________

DATE: ________________