Ph.D. Course Request for Transfer Credit

NAME:			LS	UID:	Γ	OATE:
toward your I	ting your program of study forms, co Ph.D. degree in ME at LSU. Submit rofessor to determine if the courses	a copy of th	ne previous u	miversity's	transcript and description of cou	
Please note	: Requirements of course work f	for Ph.D. I	Degree:			
The transfer of		ognizable N research (I	AS degree wi ME 9000) at	th 24 credit LSU	at least 12 credit hrs. of dissertathours – at least 12 credit hrs. of sor and advisory committee men	CORE course work with 12
		J should be	certified to l	be equivale	nt and approved by the advisory	
Semester/ Year	University	Grade	Course Number	Credit Hrs.	Brief Course Description	Comparative Course at LSU
Graduate Stu	dent's Signature Date					
Approved by: (Advisory Committee Members):						
Major Profes	sor's Signature Date					
Graduate Advisor Date				Chai	r	Date