



PERMISSION TO ENROLL (PTE) AT ANOTHER INSTITUTION AGREEMENT AND CHECKLIST

(This form should be used to submit a request to attend only one institution)

2148 Tydings, University of Maryland, College Park, MD 20742

(301)405-1697

THIS FORM MUST BE UPLOADED AND ATTACHED WHEN SUBMITTING YOUR ONLINE PTE FORM

PART I:	Semester: <input type="checkbox"/> Fall* 20__ <input type="checkbox"/> Spring* 20__ <input type="checkbox"/> Summer 20__ <input type="checkbox"/> Winter 20__ *Please be sure to indicate if you plan to concurrently enroll in Part III																				
PART II:	<p>Check and fill in the blanks as appropriate:</p> <p>Name of the institution I plan to attend is: _____</p> <p>Location (City/County and State) of school: _____</p> <p><input type="checkbox"/> I have visited the Transfer Credit Service's website (http://www.transfercredit.umd.edu/) and determined the equivalent course(s):</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Course Prefix</th> <th style="width: 15%;">Course Number</th> <th style="width: 30%;">Course Title</th> <th style="width: 20%;">UMD Equivalent Course Number and Prefix</th> <th style="width: 20%;">Which requirement type are you fulfilling? (Major, General Education, Elective, or other)</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> <p>* If course(s) is not in the Transfer Course Database, click here to get course(s) evaluated.</p>	Course Prefix	Course Number	Course Title	UMD Equivalent Course Number and Prefix	Which requirement type are you fulfilling? (Major, General Education, Elective, or other)															
Course Prefix	Course Number	Course Title	UMD Equivalent Course Number and Prefix	Which requirement type are you fulfilling? (Major, General Education, Elective, or other)																	
PART III:	<p>Check YES or NO for each of the following statements:</p> <p><input type="checkbox"/> Y <input type="checkbox"/> N I plan to concurrently enroll during the Fall or Spring semester.</p> <p><input type="checkbox"/> Y <input type="checkbox"/> N I have completed one or more of these courses previously at UMD.</p> <p><input type="checkbox"/> Y <input type="checkbox"/> N I am currently registered for one or more of these courses at UMD.</p> <p><input type="checkbox"/> Y <input type="checkbox"/> N I will be taking this course during my final 30 credits at UMD.</p> <p>If you checked YES for any of the above statements, this request is considered an Exception to Academic Policy and requires Dean's approval. Approval is neither automatic nor guaranteed. You must schedule an appointment to meet with a Feller Center Academic Advisor. Please schedule an appointment online at https://fellercenter.umd.edu/schedule-advising-appointment or call 301-405-1697. Phone appointments are acceptable in many cases.</p>																				
PART IV:	<p>By signing below I understand the completed PTE form will be emailed to me and my request will take ten to fifteen business days.</p> <p>Name: _____ UID: _____</p> <p>Phone Number: _____ E-mail: _____</p> <p style="text-align: center;">THIS FORM MUST BE UPLOADED AND ATTACHED WHEN SUBMITTING YOUR ONLINE PTE FORM</p>																				