

Primary Contact at Senior Institution: _____
Name
Email
Phone



TRANSFER BACK WORKSHEET Arrupe College of Loyola University Chicago

Please complete this form with the Alumni Coordinator

Name: _____ LID: 0000 _____
 Personal email: _____ Earned credits: ____/61
 Advisor: _____ Date: _____

Senior Institution Information

<i>College or university name</i>	<i>Address</i> <i>City</i> <i>State</i> <i>Zip</i>

Is this college or university an IAI, receiving institution?
Yes No

If you checked yes, please inform course selection using the IAI Gen Ed worksheet for students who attended multiple Schools found at: <http://www.itransfer.org/students.aspx>

If you checked no, please inform course selection using the senior institution's online catalog and attach the course description(s) to this form. Direct questions or concerns to the Office for Academic Affairs.

Eligible Coursework

A maximum of 7 credit hours may transfer back

ARRC Course	IAI Number	Degree Requirement	Equivalent Course

ex: ACFNA 105 Western Art F2 901 GECC Fine Arts ART 204 History I

Are these courses offered during the first term of enrollment?
Yes No Unsure

Please note that transfer back coursework must be taken within the first semester of enrollment. Please appeal to the Assoc. Dean for Academics, Dr. Jennifer Boyle, if the senior institution does not offer the course(s) in this term.

Do you consent to Arrupe College discussing courses and grades with appropriate personnel from the senior institution in order to initiate and facilitate the transfer back of credits?
Yes No _____
Initial

Student signature

Date

Associate or Assistant Dean for Academic Affairs

Date