${\bf Carnegie\ Mellon\ University}$

Information Networking Institute

Submit completed petition along with an official transcript and the course syllabus from the semester in which you completed the course to ini-academic@andrew.cmu.edu.

cmu.edu/ini

Information Networking Institute

College of Engineering

Phone: 412-268-7195

ini@cmu.edu

Course Transfer

STUDENT INFORMATI	ON			
Student Andrew ID:				
Student Name:	Last/Family, First and/or Preferred	d MI		
Degree:	Faculty Advisor:			
Date: mm/dd/yyyy				
	, be a graduate-level cour	other university to count as elective se at the university where it was to		
COURSE INFORMATION	N			
Course Number:	Course Name:			
University Where Course Was T	aken:			
INI ACADEMIC AND STU	DENT SERVICES U	SE ONLY:		
Approved				
Approved with the follow	ing conditions:			
Denied for the following	reason:			
INI Academic Advisor Committee	e Decision Date:	Processed by:		
Academic Advisor:			☐ Approve ☐ Deny	Date:
Pi	rint/Type Name	Signature	☐ Approve	mm/dd/yyyy
INI Director:		O'mark a	□ Deny	Date:
Pr	int/Type Name	Signature		mm/dd/yyyy

Reviewed by Committee/ Advisor/Director Notified student

Updated Stellic record

Saved e-copy in student file

Recorded in petition database