



Southern Wesleyan University AGS Program

PERMISSION TO TRANSFER CLEP/DANTES CREDITS

Please print or type the information needed below. **Give the completed form to the Student Services Coordinator for approval.** (S)he will sign the form, keep a copy on file, return the original to you, and forward a copy to the associate registrar, who will notify you only if the test is not transferable. You will need to know the SWU score recipient codes to indicate on your test(s): **CLEP = 5896 DANTES = 8135**

Name _____ SSN _____ Student ID _____

Phones (H) _____ (W) _____ Address _____

I am requesting to take the following CLEP or DANTES exam(s) to transfer to SWU as _____ elective or _____ general education (choose one) credit:

Student Signature _____ Date _____

| EXAM NAME | CLEP | DANTES | TESTING MO/YR | APPROVED (Yes or No) |
|-----------|------|--------|---------------|-------------------------|
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Reason for non-approval: _____

The above named student has been told that the exam(s) do(es) not duplicate his/her currently posted courses nor required courses, and that credit can be awarded for acceptable scores only if no duplication exists at the time Academic Records receives scores/transcripts directly from CLEP or DANTES.

Student Services Coordinator: _____ Date _____

Academic Records Use: Initials _____ Date Received _____