Health and Wellness Studies Minor Credit Evaluation/Transfer Application

I, _______________________________________, B#______________________, am in the Health and Wellness Studies minor program and wish to have an exception entered onto my DARS/Degree Works to allow the following course and credits to be accepted in the HWS minor program:

Course: ______________ Course Title: __________________________________________________________
Number of Credits: ___________ Semester Taken: __________________________ Grade: ______________
College/School Course Taken: ____________________________________________________________
   *(Please attach course syllabus)*

Student Signature: _________________________________________________ Date: ______________
________________________

FOR DEPARTMENT USE ONLY

Committee Review:

J. Wegmann: _______Approved _______Denied

Comments:__________________________________________________________________________

S. Thompson: _______Approved _______Denied

Comments:__________________________________________________________________________

L. Hrehor: _______Approved _______Denied

Comments:__________________________________________________________________________

Signature:_________________________________________________________ Date: __________________

DATE SENT FOR PROCESSING: ___________________ INITIAL: ________________