



Department of Health and Wellness Studies
PO Box 6000
Binghamton, NY 13902
Phone: (607)777-2120
Fax: (607)777-2495

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:

H. Back: _____ Approved _____ Denied

Comments: _____

L. Hrehor: _____ Approved _____ Denied

Comments: _____

DATE SENT FOR PROCESSING: _____

INITIAL: _____