INTENT TO TAKE PREREQUISITE AT ANOTHER INSTITUTION
Sociology Department

This form is to be used by students who cannot currently register for a prerequisite course they intend to take at another institution

Date: _____

Student: _____ Phone: _____

Student Number: G_____ Email: _____

Major: _____ Minor: _____

College/University where you intend to take the course: _____

State (If other than Michigan)_____

Course(s) you intend to take – Use exact Dept. abbreviation and number (e.g.; SOC323) from institution where you will take the course	Semester/Yr (e.g.; Fall 08) course will be taken	Date (MM/DD/YY) you will be able to register for this course	What course is this equivalent to at GVSU based upon information at www.michigantransfernetwork.org? **If equivalency has not previously been determined, take course description to GVSU dept. offering the prerequisite course**	What course at GVSU is this course a prerequisite for?	Semester/Yr you will take the course this is a prerequisite for at GVSU	*Dept. Use Only* Equivalency Verification Initials of Staff

I understand that I must submit an official course schedule verifying my enrollment in the above classes to the sociology department within one week after registering for the course in question, or I will be dropped from the GVSU course. I also understand that, once I complete the course, I must send a transcript noting the course to GVSU as soon as my grade is officially posted.

_____
Student Signature

Verification can be delivered in person to the department office, 2170 AuSable Hall, or by fax (616 331-3735) to the attention of Dr. Marshall Battani. If you mail verification, it is your responsibility to ensure that it is delivered to the department by the specified date. Mailing address: Sociology Department, Grand Valley State University, 2170 AuSable Hall,1 Campus Drive, Allendale, Michigan 49401

_____
- Department Use Only –
Department Action: _____Approved and entered into Banner _____ Not Approved

Date: _____ Initials: _____
Date that registration must be verified to prevent student from being dropped from the GVSU course: _____

Date/Time Email Sent: _____

Other