PETITION FOR TRANSFER OF CREDIT

THE MASTER OF ENGINEERING PROGRAM
THE CASE SCHOOL OF ENGINEERING
CASE WESTERN RESERVE UNIVERSITY

Student Name: __________________________________________________________

Student ID: _______________ Student e-mail: __________________________

Master of Engineering Program Concentration: __________________________

Courses to be reviewed for transfer credit:

Note: Please attach a catalog course description (required) and syllabus (recommended).
Also have an official transcript sent to us from the school at which the course was taken and completed. Only courses that have not been used to satisfy the requirements of an undergraduate or graduate degree may be considered for transfer credit.

Date of Completion: _______________ Course Number: _________________

Course Name: _______________________________________________________

School: ____________________________________________________________________

Was this course counted as part of a degree? Y / N

Date of Completion: _______________ Course Number: _________________

Course Name: _______________________________________________________

School: ____________________________________________________________________

Was this course counted as part of a degree? Y / N

Date of Completion: _______________ Course Number: _________________

Course Name: _______________________________________________________

School: ____________________________________________________________________

Was this course counted as part of a degree? Y / N

Student Signature: ______________________ Date: ________________

Please return this form to the Master of Engineering Program Office, Case School of Engineering, Case Western Reserve University, 500 Nord Hall, 10900 Euclid Ave., Cleveland, OH 44106-7220 or Fax to (216) 368-6939.