Request for Area of Knowledge Coding for Inter-Institutional Course

INFORMATION

DEADLINE for Submission of Coding Requests
Students who wish to submit a request for Area of Knowledge coding of an inter-institutional course should normally do so at the same time they request approval for enrolling in the course. The absolute deadline, however, is the last day of classes of the semester in which the course is taken.

INSTRUCTIONS for Requesting Area of Knowledge Coding of an Inter-Institutional Course
Prior to taking the course, you should obtain the approval from the relevant department at Duke and from your academic dean for credit for the course under consideration. Information about the procedure and necessary form are available at http://t-reqs.trinity.duke.edu/inter.html

At the same time – if you wish to request an Area of Knowledge for the course – you should complete the form below and submit it to the Director of Undergraduate Studies and your academic dean for approval.

--SCROLL DOWN FOR REQUEST FORM--
REQUEST FORM FOR AREA OF KNOWLEDGE CODE FOR
INTER-INSTITUTIONAL COURSE

Name of Student (print last, first, MI)__________________________ Date________________

Student ID#__________________________ Student’s E-mail _____________________________

Name of Visited Institution__________________________________________________________

Location_________________________________ Dates Attended: From ______________ To ______________

Department, Course Number, Title, and Description of the inter-institutional course as they appear in the official
Bulletin of that institution.
___________________________________________________________________________________________
___________________________________________________________________________________________

URL where this course is described (if available): http://______________________________________________

(Attach printout of the URL)

AREA OF KNOWLEDGE CODE REQUESTED (CHECK ONE MAXIMUM)

(____) ALP   (____) CZ   (____) NS   (____) QS   (____) SS

APPROVAL OF REQUESTED AREA OF KNOWLEDGE CODE:

1) ___________________________________________  _____________________________
Signature of Director of Undergraduate Studies of department that approved enrollment in the course

______________________________  ____________________________
Name of Department                                      Date

AND

2) ___________________________________________  _____________________________
Signature of Student’s Academic Dean

______________________________  ____________________________

Name of Department                                      Date