

DEPARTMENT OF HEALTH OUTCOMES & BIOMEDICAL INFORMATICS COURSE TRANSFER/COURSE SUBSTITUTION REQUEST FORM

I am requesting that the Curriculum Committee approve the transfer of the following credit hours, as indicated on my transcript. I've attached the syllabi for all courses (except Dep't Courses) and a Cover Letter explaining why this course transfer should be allowed. My mentor and advisor have approved this request. I have met the requirement for timely submission.

Student Name _____ **Signature** _____ **Date** _____

Academic Advisor Name _____ **Signature** _____ **Date** _____

TRANSFERING FROM

REQUESTING TRANSFER TO UF* Use page 2 for explanation

Institution (i.e. Pitt)	Course Prefix & Number	Course Title	Credits	Grade	Term & Year	Specify Equivalent Course Title and Number (Mandatory if Required here)	Specify PhD Curriculum Category (i.e. Epi elective)	Credits at UF	Chair Check if approved

The Curriculum Committee approves these credits towards the program of study for the PhD in Health Outcomes and Biomedical Informatics.

Date: _____ **Committee Chair** _____ **Total Hours** _____

*upon approval, Program Assistant will enter request into student's record in GIMS for Graduate School approval.

Entered in GIMS and PhD Student Database (Date/Initial) _____

Copy sent to student and Adviser (Date/Initial) _____

_____ Date _____

Explanation of Request to Transfer by Course.

Course of Study (i.e. MPH) in which courses were completed _____

Please enter course title and explain why this course should be accepted for its UF equivalent course or category IF the course is not the same course.

Course Title	UF Equivalent or Category	Explanation