University of California, Santa Barbara College of Letters and Science Send the completed form to academic_advising@Ltsc.ucsb.edu

CREDIT AND ENROLLMENT CLARIFICATION

Name:		PERM #	
Last	First	Middle	
Phone #		U-Mail Address:	
Alternate Email Address (if U-Ma	ail is inactive):		Date:
Major(s)		Expected Date of Graduation	
☐ Concurrent Enrollment	Repeat/Credit Clarifica	tion	(non-DARS Major/GE Req., etc.)
The Request [Include the qua Concurrent Enrollment or Le	arter in which you plan to enrogal Repeats, include the name	oll in the course(s) and the of the institution where y	e course numbers and titles. For you plan to take the course(s)]:
Justification for the Request			
Department/Program endors	ement (if necessary)*:	Final action by the De	ean:
☐ Endorsed ☐ Endorsed wit	h Conditions Not Endorsed	Approved App	proved with conditions
Comments from the Chair/Ad	dvisor:	Comments from the D	Dean:
Department Chair/ Faculty A	dvisor Date	Dean	Date

^{*}A request for a course completed at another UC to serve as a legal repeat for UCSB course cannot be approved without the UCSB department's endorsement. The major department's review is required if a student is requesting a second repeat of a course that is applicable to the student's major, but the Dean has final approval. There are also other matters regarding credit clarification that may require a department's response. Please consult with the College of Letters and Science: duels.ucsb.edu/advising.