Office of Records & Registration - 830 Westview Drive SW, Atlanta, Georgia 30314 Phone: (470)0639-0959 email:records@morehouse.edu				
OFF-CAMPUS APPROVAL FORM         For which term and year: (check one)				
2025 2026 2027 2028 2029				
MCID#Student Name:				
Telephone Number:	rehouse Email:			
(REQUIRED)         Major:				
GUIDELINES (Please Read Carefully)				
<ul> <li>The Off-Campus Approval Form MUST be completed with all required signatures BEFORE you enroll at the host institution.</li> <li>Student's who enroll in courses at another institution without prior approval WILL NOT not receive academic credit even if an official transcript from the host institution is presented thereafter.</li> <li>Repeat courses may be taken at another college during the summer (with approval) however; they will not count towards GPA calculation.</li> <li>Departmental approval must correspond with the equivalent department where the course is taught at Morehouse College. Your major Academic Program Director (APD) should not approve equivalencies outside of his/her area.</li> <li>Once departmental equivalencies have been obtained and approved, the major Academic Program Director must sign the off-campus approval form as final academic authority.</li> <li>Pay the appropriate processing fee to the Cashier's Office. (A receipt must accompany this form - please upload)</li> <li>Must earn a "C" or better to be considered and transferred back to home institution.</li> <li>The Office of Records &amp; Registration will determine eligibility based on academic standing and total transfer hours.</li> </ul>				
Host Institution/ State (Completed by Student)	Course No. and Course Title to be taken at Host Institution (Completed by Student)	Course Credit Hours (Completed by Student)	MC Equivalent Course &Title (Completed by APD)	Approval and Signature of corresponding APD
Student is currently in good academic standing.				
□ Student is currently	not in good academic standing			
Major Academic Pro	gram Director Approval			
Signature:Date:Date:				
Office of Records &	Registration Approval			
AR Signature:Date:				
Please submit a	(All guidelines verified) n official college transcript from the host instituti Morehouse Co Attn: Office of Records Gloster Hall 830 Westview D Atlanta, Georgia (Form must accompany official tran	bllege & Registration 106 rive SW 30314		ntioned course(s) to: