HOW-TO GUIDE FOR PERMISSION TO TAKE CLASSES OUTSIDE OF SAIC

Students who wish to take a class or classes at another institution must meet with an Academic Advisor to discuss eligibility before seeking approval from the department chair or designee.

ALL OF THE BELOW ELIGIBILITY REQUIREMENTS MUST BE MET PRIOR TO PERMISSION BEING GRANTED:

☐ You must be in good academic standing.
☐ You must have completed all Contemporary Practices requirements to transfer any Studio or General Elective credits.
☐ You must have completed 6 credit hours of English to transfer any Liberal Arts credits. 
  Note: Students will be granted Permission for only 3 credits of Liberal Arts, except in special cases.
☐ You must have completed 6 credit hours of the Art history survey requirement to transfer any Art history credits.
  Note: Students will be granted Permission for only 3 credits of Art History, except in special cases.
☐ You must submit official course descriptions.
☐ Course must not duplicate courses offered at SAIC.
☐ Courses must be at a high academic level (e.g. no remedial or college prep courses).
☐ Courses must be taken through a regionally accredited college or university.

PERMISSION WILL ONLY BE GRANTED FOR A TOTAL OF 15 CREDITS OVER YOUR ENTIRE SAIC CAREER.

☐ STEP 1: MEET WITH AN ACADEMIC ADVISOR
  Contact: Academic Advising, 312-629-6800, Sullivan Center 1204 to make an appointment or come for a walk-in. The Academic Advisor will go over materials, and next steps. Note: Students are encouraged to bring course descriptions to their appointment.

☐ STEP 2: SEEK ADDITIONAL APPROVALS (IF NECESSARY AND AS NOTATED BY ACADEMIC ADVISOR)
  A: FOR UNDERGRADUATE LIBERAL ARTS REQUESTS: Paul Ashley, Chair of the Liberal Arts Department. Appointments should be made through Kelly Christian, Liberal Arts Administrative Assistant: kchristian3@saic.edu, 312-345-3788. Note: Students are required to bring course descriptions and Permission form to this appointment.
  B: FOR UNDERGRADUATE ART HISTORY, STUDIO, OR GENERAL ELECTIVE REQUESTS: Proceed directly to Step 3.
  C: GRADUATE STUDENTS: All courses must be approved by your Dept. Chair or Graduate Program Director.

☐ STEP 3: SUBMIT FORM AND ALL MATERIALS TO REGISTRAR’S OFFICE
  The Registrar's office will review your request for final approval. An additional appointment is not needed. Drop off all materials (completed form, advisor and any required departmental signatures, and course descriptions) to the Registrar’s Office in Sullivan Center 1210 or submit electronically via saic.registrar@saic.edu and allow 3 to 4 days for processing. Students will be notified of final approval by saic.edu email. Note: Requests missing required materials or signatures will NOT be approved. It is the responsibility of the student to submit a complete request. See an Academic Advisor if you are unsure you have fully prepared your request.

☐ STEP 4: UPON COMPLETION OF COURSEWORK, SUBMIT YOUR TRANSCRIPT FROM THE OUTSIDE INSTITUTION
  You must receive a grade of “C,” its equivalent, or better to earn credit at SAIC. Upon completion of your coursework, please have the Registrar at your outside institution send your official transcript directly to the Office of Registration and Records at SAIC at the address below:

  School of the Art Institute of Chicago
  Office of Registration and Records
  36 South Wabash Avenue, suite 1210
  Chicago, IL 60603

QUESTIONS? Contact Academic Advising at 312-629-6800, studenthelp@saic.edu, Sullivan Center 1204
PERMISSION TO TAKE CLASSES OUTSIDE OF SAIC

Students must first meet with an Academic Advisor to discuss eligibility. If all eligibility requirements are met, students may then seek approval from the appropriate Department Chair or designee. Please complete all sections of this form as instructed. Incomplete forms and materials will not be accepted. If you have questions, please contact the Academic Advising office at 312-629-6800, studenthelp@saic.edu, Sullivan Center 1204.

SECTION I (to be completed by the Student)

<table>
<thead>
<tr>
<th>STUDENT NAME (LAST, FIRST)</th>
<th>STUDENT ID NUMBER</th>
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<tr>
<td>ADDRESS</td>
<td>DEGREE PROGRAM</td>
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<td>CITY/STATE/ZIP</td>
<td>SCHOOL YOU WILL BE ATTENDING</td>
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<td>PHONE NUMBER</td>
<td>TERM (SEMESTER/Q UARTER) AND YEAR</td>
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<td>DATE</td>
<td>NUMBER OF SEMESTER/Q UARTER HOURS REQUESTED</td>
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SECTION II (to be completed by an Academic Advisor)

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<thead>
<tr>
<th>DATE COMPLETED</th>
<th>ACADEMIC ADVISOR INITIALS (PRINT)</th>
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ELIGIBILITY REQUIREMENTS THAT HAVE BEEN MET:

- [ ] Good Academic Standing
- [ ] English
- [ ] Contemporary Practices
- [ ] Art History
- [ ] Course descriptions

TRANSFER CREDIT THROUGH PERMISSION

TRANSFER CREDIT AT ADMISSION

TOTAL CREDITS LEFT FOR DEGREE

OTHER NOTES

DURING THE ADVISING MEETING:

- [ ] Discussed course types student is interested in and what these would generally count for
- [ ] Reviewed student’s residency requirements and discussed any impact on requirement completion
- [ ] Discussed additional approvals needed (Indicate additional approval needed below or N/A):

  **Additional Approval Needed:**

  ______________________________________________________
SECTION III (to be completed by the student and approved by the appropriate Department Chair or designee (when applicable) before submitting to the Registrar’s office)

Course Title

I REQUEST THAT THIS COURSE COUNT TOWARD THE REQUIREMENT FOR:

☐ Studio  ☐ Natural Science  ☐ Social Science  ☐ Humanities
☐ Liberal Arts Elective  ☐ Art History  ☐ General Elective

DEPARTMENT CHAIR OR DESIGNEE SIGNATURE ____________________________  DATE __________

SECTION III

Course Title

I REQUEST THAT THIS COURSE COUNT TOWARD THE REQUIREMENT FOR:

☐ Studio  ☐ Natural Science  ☐ Social Science  ☐ Humanities
☐ Liberal Arts Elective  ☐ Art History  ☐ General Elective

DEPARTMENT CHAIR OR DESIGNEE SIGNATURE ____________________________  DATE __________

SECTION III

Course Title

I REQUEST THAT THIS COURSE COUNT TOWARD THE REQUIREMENT FOR:

☐ Studio  ☐ Natural Science  ☐ Social Science  ☐ Humanities
☐ Liberal Arts Elective  ☐ Art History  ☐ General Elective

DEPARTMENT CHAIR OR DESIGNEE SIGNATURE ____________________________  DATE __________

SECTION IV (to be completed by the Registrar)

☐ All Classes Approved  ☐ Individual Classes Approved: ____________________________________________

REGISTRAR SIGNATURE ____________________________  DATE __________