

## Petition for Summer Course Approval

Email to [sharon.gonzales@uky.edu](mailto:sharon.gonzales@uky.edu) with subject line: Course Approval

**Prior to request, please refer to these resources for course comparison.**

- Courses From Other Colleges - Transfer Equivalencies:  
<http://pharmacy.mc.uky.edu/programs/prepharm/transfer.php>
- UK COP prereqs: <http://pharmacy.mc.uky.edu/programs/prepharm/coursework.php>.
- UK course descriptions: <http://www.uky.edu/registrar/content/2015-16-course-descriptions>

**Your Name:**

**UK Course Name and #:**

**Name of Accredited Institution offering Course to be considered:**

**Course Name and # you plan to take:**

**Date course will be completed by: (we must have a grade prior to the PharmD August Orientation)**

**Website link to official course description:**

**Official Course description\*: (may copy and paste from website)**

**Explanation for Summer Course Request:**

**List any other (non prereq) courses you plan to take this summer, if applicable.**

*\* In some cases, we will require a syllabus to approve course work in order to determine if the course meets UK prerequisite standards. You may include a syllabus if you have one.*