

Lancaster Theological Seminary

External or On-line Study Request Form

If you wish to have a record of this transaction, please print a copy for your files.

Today's Date:

Student Name:		Program:	
 for an On-line course offered by LTS No more than one-third of the offered students must consult with the c	must request authorization p credits needed to earn the LTS ir advisors for approval to reque with a request for on-line study d fees, an administrative fee is d at another institution, the studen to that institution is the respons deadlines for dropping an on-line	degree may be taken through the country degree may be taken through an institution of fered through an institution of the country and be acceptability of the student.	d by another ATS-accredited institution or urse. The following parameters apply: ough another institution and/or on-line study, tion other than LTS. course undertaken through LTS. epted at the other institution for participation; or for regularly-scheduled courses. See the
Course Number:	Course Title:		
Institution offering the course:			Beginning and End Dates of the course:
NOTE: A syllabus must be attached for a student must request an official transcript			an LTS. Upon completion of the course, the
This course is traditional course	on-line course	combination of on	a-line and traditional
If this course is to meet an LTS require			
If this course is to meet an LTS require State the reason(s) you are requesting	ment, please indicate the req		
·	ment, please indicate the req		
State the reason(s) you are requesting	ment, please indicate the req	uirement:	e of Advisor:
State the reason(s) you are requesting Approval of Advisor: Print Name of Student's Advisor: Submit completed and	ment, please indicate the req	uirement: Signature	of Advisor:
State the reason(s) you are requesting Approval of Advisor: Print Name of Student's Advisor:	ment, please indicate the req	uirement: Signature	of Advisor:
State the reason(s) you are requesting Approval of Advisor: Print Name of Student's Advisor: Submit completed and	ment, please indicate the req	uirement: Signature	of Advisor: