Graduate Student Transfer of Credit Request Form

Student Information

INSTRUCTIONS: Complete the section below and submit this form to your department. Send your department an official transcript listing the course(s) for which you are requesting transfer credit.

Eagle ID Number: 

Name: ____________________________

Street: __________________________________

City: ____________________________ State: _____ Zip: ___________

Department: ____________________________ Advisor: ____________________________

Summary of all previous college education:

<table>
<thead>
<tr>
<th>Institution</th>
<th>Location</th>
<th>Degree</th>
<th>Date Received</th>
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Transfer of Credit Requested

PLEASE NOTE: A maximum of 6 credits may be accepted in transfer toward any one degree program. All courses must be graduate level and carry a grade of “B” or better. Courses that have already been applied to a previously earned degree may not be transferred. Courses completed over 10 years ago are not acceptable for transfer.

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<tr>
<th>University</th>
<th>Course Title</th>
<th>Course Number</th>
<th>Credits</th>
<th>Grade Received</th>
<th>Date of Completion</th>
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Department Approval

Advisor or Study Committee
Chairperson’s Signature: ____________________________ Date:

Department Chairperson’s Signature: ____________________________ Date:

Chairperson will forward all copies of this form and the transcript[s] to the Associate Dean.

Associate Dean’s Approval

Associate Dean’s Signature: ____________________________ Date:

White Copy: Student Services
Yellow Copy: Department
Pink Copy: Student

Updated 12/17/20