

## **Transfer Credit Approval**

This form should be filled out if you are requesting to transfer in graduate credit. **A maximum of 9 credits of a B or higher is allowed to transfer.**REQUESTS FOR TRANSFER CREDIT MUST BE ACCOMPANIED BY COPIES OF THE SYLLABUS AND A COURSE DESCRIPTION FROM THE
APPROPRIATE COLLEGE CATALOG.

Please complete this form and return to the Registrar's Office once you have the required signatures listed below

## COMPLETE ALL REQUESTED INFORMATION AND OBTAIN ALL REQUIRED SIGNATURES

ame:	Fredonia ID		
referred Email:			
On Campus Address:	Telephone:		
Permanent Address:			
Street	City	State	Zip
Current Degree Program	<del></del>		
College Transfering From:			
Date of Attendance:			
Transfer Course Number/Title:		Fredonia Equivalent:	
THIS COURSE IS TO BE USED AS A COURSE RE	EPEAT: Yes No		
REQUIRED	SIGNATURES by the f	following offices:	

Office Name & Location	Signature	Date
Department Chairperson/Director/Graduate Program Coordinator		
Registrar's Office		

This form can only be used to transfer in up to 9 credits of a B or higher at the graduate level. Students wishing to transfer additional credits must seek a waiver from the Associate Provost for Graduate Studies.