



UNC
GREENSBORO
 The Graduate School

270 Mossman Building
 1202 Spring Garden Street
 Greensboro NC 27412
 336.334.5596 Phone
 336.334.4424 Fax

MASTERS/CERTIFICATE STUDENT REQUEST FOR TRANSFER CREDIT

The regulations governing the transfer of credit are set forth in *The Catalog* in the section on **Course Credit**. Approval to transfer credit to a degree program is conditional upon compliance with ALL limitations stated therein. If transfer credit is from before semester of admission, your degree time limit will change. The graduate student must include the course description of the course(s) taken at another university/college to request preliminary approval. Upon completion of the course(s), the student must request that a final, official transcript be sent to The Graduate School.

PhD students are not required to fill out this form. Instead, transfer credit should be included on the student's Doctoral Plan of Study.

Student Name: _____ UNCG ID Number: _____

Name of University Visited: _____

Course(s) presented for transfer:

Course Number/Title:	Semester/Year:	Credits accepted:	This course substitutes for...	
_____	_____	_____	A Major Requirement	An Elective
_____	_____	_____	A Major Requirement	An Elective
_____	_____	_____	A Major Requirement	An Elective
_____	_____	_____	A Major Requirement	An Elective

I have read the Policy on Continuous Enrollment and the regulations governing transfer credit in *The Catalog* and understand that I bear sole responsibility for meeting all the conditions stated therein.

Student Signature: _____ Date: _____

*I recommend the above course(s) for transfer credit to the student's graduate degree program at UNCG.

Department Head or Graduate Program Director: _____ Date: _____

The Graduate School: _____ Date: _____

***Final approval granted by The Graduate School upon receipt of final, official transcript.**