

## PETITION FOR TRANSFER CREDIT FORM

Student Name \_\_\_\_\_ P# \_\_\_\_\_ Date \_\_\_\_\_

Student Address \_\_\_\_\_

Phone \_\_\_\_\_ Major \_\_\_\_\_ Term of Admission \_\_\_\_\_

This form is to be used to request acceptance of transferable coursework

Students seeking transfer credit must submit the following supporting documents for credit evaluation purposes:

1. Official transcript
2. Course description from college catalog [appropriate year(s) for course work completed]
3. Course syllabi for each course to be reviewed

Evaluation material must be attached to this request form and additional documents maybe required. Credit may be awarded only after review and approval by the appropriate academic department. Dean decisions regarding transfer credit are final.

List all transfer courses within a department on one form. Use as many forms as needed.

Transfer Institution: _____			City, State: _____	
Course Prefix	Course #	Transfer Course Title	Credit Hours	PSCC Equivalent Course
<i>*Example - PSYC</i>	<i>101</i>	<i>Intro to Psychology</i>	<i>3.00</i>	<i>PSY1010</i>

Advisor Signature: \_\_\_\_\_ Advisor Name (printed) \_\_\_\_\_ Date: \_\_/\_\_/\_\_

### TO BE COMPLETED BY AUTHORIZED DEPARTMENT PERSONNEL

To: \_\_\_\_\_ Department: \_\_\_\_\_

Please review this request for transfer credit and the attached material to make specific transferable credit recommendations applicable to your department.

Recommendation: Approval \_\_\_\_\_ Denial \_\_\_\_\_

Department Dean: \_\_\_\_\_ Date: \_\_\_\_\_

Additional Comments or Criterion:

\_\_\_\_\_

\_\_\_\_\_

Records Office Official: \_\_\_\_\_ Date: \_\_\_\_\_

**RETURN THIS FORM TO THE RECORDS OFFICE WITH SUPPORTING DOCUMENTATION.**