



Lunenburg Campus

Request for Transfer Credit

Copies of transcript and course outline supporting the credit request must be attached before application to be considered. If submitted during the semester, student is to attend all classes until notified regarding credit transfer outcome by Campus Registrar.

Date: _____ Student ID: _____

Student name: _____

Program: _____

Credit requested for: _____

Course scheduled in: Fall semester Winter semester Spring semester

~~~~~ *Details on previous course* ~~~~~

Course name: \_\_\_\_\_

Course taken at: \_\_\_\_\_

Date taken: \_\_\_\_\_ Final grade \_\_\_\_\_

### For campus use only

|                     |     |                          |    |                          |
|---------------------|-----|--------------------------|----|--------------------------|
| Student Interviewed | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Transcript Attached | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Course Outlines     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Request Recommended | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

Faculty Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Academic Chair Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Registrar Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Credit posted on PeopleSoft      Yes       No       Date: \_\_\_\_\_

**Please keep this document in student file**