TRANSFER CREDIT FORM

To be used by academic advisors in communicating with the U of N Provost Office.
The following information is needed for the approval of transfer credit from another institution:

1. A copy of the original transcript must be attached to this form.
2. This form and the original transcript needs to be sent to the Provost Office for transcript evaluation and permanent storage.

_____ _____
Student's Name Academic Advisor's Name

_____ _____ _____
College/Faculty of Student Degree Degree Degree Programme

_____
Name of Institution that issued transcript.

_____
Location of Institution - City - State/Province - Country

Years student attended _____ TO _____ (Example: 1986 to 1988)

	NAME OF COURSE TO BE CREDITED TOWARD U of N COURSE	COURSE # & CREDIT	RELATED TO U of N COURSE #
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

College/Faculty approval for Transfer Credit: _____ _____
Signature Date

Provost Office approval of Transcript: _____ _____
Signature Date

NOTE: Credit can be approved that is not used for the declared degree of your College/Faculty. This can be listed also.