

TRANSFER CREDIT REQUEST FORM

A student may transfer in up to 12 semester credit hours of graduate level coursework completed at another institution toward completion of a degree. All transfer credit is subject to approval of the department chair and the course instructor. Only those courses with a grade of a B or higher or Pass in a Pass/Fail course from an accredited institution will be transferred.

This form should be submitted to the Office of Student and Academic Services via email at cph@unthsc.edu.

Date Submitted: _____

Student Name: _____

Student ID Number: _____

Email Address: _____

UNTHSC Course you request Advanced Standing for:	Course taken at another university	University Name	Semester/Year	Semester Credit Hours/Grade Received	Date Syllabus Submitted to OSAS
<i>Example: BIOS 5300: Biostatistics for PH</i>	<i>STATS 6000: Statistics for Health</i>	<i>University of Public Health</i>	<i>Spring 2013</i>	<i>3 SCH/A</i>	<i>5/14/2014</i>

Advisor Signature: _____

Department Chair Signature: _____

OSAS Use Only: Received/Filed by _____