

REQUEST FOR TRANSFER OF GRADUATE CREDIT

Transfer credits will not be reviewed without official transcripts on file. Requests for transfer credit must be submitted with your application for admission. The Graduate Office accepts a maximum of 6 semester hours in transfer credits from accredited institutions. Transferred courses are only valid if taken within six years of your anticipated year of graduation.

Name of Applicant:

 Last Name (Legal Name) First Name Middle Initial Maiden Name

Mailing Address:

 (P.O. Box, RFD, Street)

 City State/Province Zip Code Country (If other than USA)

(_____) (_____) _____

Home Telephone Number Work Telephone Number

Social Security: _____ Expected Year of Graduation: _____

Email Address: _____

I am requesting the following course(s) be transferred into the program to which I am applying. I understand that these courses must be from an accredited institution, taken for graduate credit, that I must have received a grade of "B" (3.0) or better, and that these courses must not have been used to fulfill requirements for another degree program.

NOTE: The Graduate Office accepts a maximum of 6 semester hours in transfer credits from accredited institutions.

COURSES FROM OTHER INSTITUTIONS

Institution	Course Number	Course Title#	# of Credits (6 cr. Max)	Semester/Year Taken	Approved Office Only	Not Approved Office Only

Send official transcripts to: **C.F. BRINE, P.O. BOX 1060, BROCKTON, MA 02303**

Applicant's Signature: _____ Date: _____

Graduate Program Chair Signature: _____ Date: _____

GCE Dean's Signature: _____ Date: _____

Twelve (12) semester hours of **Fitchburg State U** credit taken within a year prior to the student's admission may be applied to the degree program with the approval of the Program Chairperson. No more than six (6) semester hours of course work at the 6000 level may be applied toward a degree program.

FITCHBURG STATE UNIVERSITY COURSES

Course Number	Course Title#	# of Credits (12 cr. Max)	Semester/Year Taken	Approved Office Only	Not Approved Office Only

ALL APPLICATION MATERIALS ARE MAILED TO:
C.F. BRINE, P.O. BOX 1060, BROCKTON, MA 02303