

FAIRMONT STATE UNIVERSITY GRADUATE STUDIES

REQUEST FOR TRANSFER OF CREDIT

Name: _____ ID No. _____

Address: _____
(Number and Street) (City) (State and Zip Code)

Telephone: _____ Email Address: _____

Degree Program: _____ Concentration _____

Transfer Credit Requirements:

- A student may transfer **up to 12 credit hours** of completed graduate work and apply these toward a graduate degree at Fairmont State.
- The credit must be earned from another accredited institution and not used to fulfill the requirement of another degree.
- A minimum grade of B or higher must be earned in the course to be accepted as Graduate credit at Fairmont State.
- Students seeking transfer credit must have regular admission to graduate study and be in good academic standing at both Fairmont State University and the school in which the credits were earned.
- All transfer credit must be taken within the time limitations on course work that are applied towards master's degree requirements.
- Official transcripts for credit must be attached or on file with the Office of Admissions before transfer credit can be approved. Attach a copy of the catalog course description and/or syllabus.
- Transfer credit requires the approval of the Program Coordinator and the Graduate Program Director.
- Credit taken after admission to FSU must be approved by the student's Graduate Advisor **prior** to enrollment.

Course #1

College or University	Course #	Course Title	Credits	Date Taken	Grade
<i>Comparable FSU Course</i>					

Comments:

Course #2

College or University	Course #	Course Title	Credits	Date Taken	Grade
<i>Comparable FSU Course</i>					

Comments:

Course #3

College or University	Course #	Course Title	Credits	Date Taken	Grade
<i>Comparable FSU Course</i>					

Comments:**Course #4**

College or University	Course #	Course Title	Credits	Date Taken	Grade
<i>Comparable FSU Course</i>					

Comments:

Student's Signature: _____ Date: _____

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- Course #1 **Recommended** **Not Recommended**
 Course #2 **Recommended** **Not Recommended**
 Course #3 **Recommended** **Not Recommended**
 Course #4 **Recommended** **Not Recommended**

Program Coordinator Signature: _____ Date: _____

Approved **Not Approved**

Graduate Program Director Signature: _____ Date: _____

Approved **Not Approved**

Comments: