**GRADUATE STUDIES**

**UNIVERSITY OF WISCONSIN-WHITEWATER**

**APPLICATION FOR TRANSFER CREDIT APPROVAL**

This form must be used to obtain approval for the transfer of credits. All course work, with the exception of up to nine credits, must be completed at UW-Whitewater. **Students who have already been admitted to a degree program here and who wish to take a course at another institution and have it transferred to UW-Whitewater, must obtain permission prior to enrolling in the course**. The institution at which the student wishes to earn graduate credit may also require documentation of the student's graduate status at UW-Whitewater.

Within the nine credit transfer limit, credit for a course completed at another institution may be transferred to UW-Whitewater and applied toward a graduate degree provided (1) the institution offering the course is regionally accredited at the graduate level, (2) the course appears as a graduate course on the student’s graduate transcript from the institution offering the course, (3) the course is applicable toward a graduate degree at the institution offering the course, (4) the course is appropriate for the student’s proposed graduate degree program at UW-Whitewater, (5) the course is not a correspondence course, nor is it taught in a format less rigorous than that for UW-Whitewater courses\*, and (6) the student earned a grade of at least **B** (3.00) for the course.

\*Graduate coursework from UW-Whitewater and those accepted in academic transfer from other accredited institutions must conform to the time-based educational attainment in accordance with the Carnegie Unit: a minimum of sixteen contact hours, plus the provision for at least 32 hours of student preparation and out-of-class activity, per credit.

**NO TRANSFER CREDIT REQUEST WILL BE CONSIDERED WITHOUT THE FOLLOWING INFORMATION AND SUPPORTING MATERIALS/DOCUMENTS**

***This form must be completed for each course for which a request for transfer is made*.**

**To be completed by the Student**

Date of Application:     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:

 (Last) (First) (Middle) Whitewater Student ID #

Institution offering requested course:

Term to be taken: [ ]  Fall [ ]  Spring [ ]  Summer Year

Course Prefix/Number:       Title:

Credits to be earned:       Credits requested for transfer

Meeting location:

Meeting dates/times:

 Start Date End date Number of Meetings Meeting times

**Attach the following documents:**

1. Photocopy of catalogue course description
2. Course syllabus (if available)
3. Verification that the course is a graduate course
4. Verification that the course is applicable to a graduate program at the institution offering the course

**Return this form to the School of Graduate Studies and request that the registrar of the above institution send an official graduate transcript directly to the following address:**

 ***Address:* Office *of Graduate Studies, Roseman 2013, 800 W Main St, Whitewater, WI 53190***

 ***Email: gradschl@uww.edu***

**To be signed by the student**

I hereby attest to the accuracy of the above information. I realize that the course must satisfy the UW-Whitewater requirements for transfer of credits as listed above.

**Signature of Student**      Date

**►For Graduate School Office Use Only**

 [ ]  From an institution regionally accredited at the graduate level

 [ ]  Taken for graduate credit

 [ ]  Applicable to graduate degree at institution offering the course

 [ ]  Format as rigorous as for UW-Whitewater courses

 [ ]  Not a correspondence course

 [ ]  Fits within student’s nine-credit limit

**►To be completed by Program Coordinator**

[ ]  The above course is appropriate for the student’s graduate degree program and will count for \_\_\_\_\_\_\_\_ credits

 Conditions, if any (attach additional explanation if necessary)

[ ]  This course is equivalent to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at UW-Whitewater, or

 [ ]  This course serves as an elective \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(Course name and number)*

[ ]  The above course is not appropriate for the student’s graduate degree program

**Signature of Program Coordinator**  **Date**

**► For Graduate School Office Use Only**

 [ ]  The above course is appropriate for the student’s graduate degree program and will count for \_\_\_\_\_ credits. If the course has not been completed, acceptance is contingent of an official graduate transcript indicating that the above student has successfully completed the course with a grade of at least B (3.00).

 [ ]  The above course is not accepted for transfer credit.

**School of Graduate Studies** **Date**

\* Degree Completion Date