Transfer Credit
Prior Approval

This form is to be used by students who wish to take courses at another college, university, or during a study abroad program and have the courses transfer back to SNC. All courses require advanced approval to insure they are transferable.

Students must provide a copy of the course description with this form. The student should first see their advisor to discuss if the requested course is appropriate for the requirement they are attempting to fulfill. After the advisor and the department chair sign the form, it should be returned to the Registrar’s Office for final approval. A copy will remain in the student’s file. Please note: Students must take final 30 credits at SNC.

Name: ___________________________ Date: ___________

Student ID No. ______________________________________________

Address: ____________________________________________________________________

Telephone No.: ____________________________________________________________

Name of Institution Student Plans to Attend: ________________________________

Semester(s) Plans to Attend: ________________________________________________

<table>
<thead>
<tr>
<th>Transfer Course SUBJ and NUMBER</th>
<th>Transfer Course Title</th>
<th>Title of Transfer Course When Articulated to SNC Transcript</th>
<th>Units</th>
<th>MANDATORY Choose One:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1. Elective</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2. Course Substitution</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3. Direct Articulation</td>
</tr>
</tbody>
</table>

In order for credits to transfer, the student must have an official transcript sent from the institution they attended to the Registrar’s Office. Courses must be passed with a “C” or better in order to transfer.

Comments: ___________________________________________________________________

Advisor Signature: ___________________________________________________________________

Department Chair* Signature: __________________________ Date: __________________

Registrar’s Signature: __________________________ Date: __________________

*Signature of Department Chair for department of intended transfer course is required. For example, if transferring a History course, the Humanities Dept. Chair must sign this form.

This form should be returned to the Registrar’s Office
Updated: 4/9/13