

The School of Graduate and Professional Studies

Southern University at New Orleans

Application for Transfer of Graduate Credit from Other Institutions

(Please Type)

Name: _____
(Last) (First) (Middle)

U# _____

Please provide the following information about the course(s) being transferred:

Institution (where taken)	Course Number/Title	SUNO Equivalent Course Number/Title	Credit Hours	Date Taken	Grade Earned

I certify that the information provided above is accurate and complete. I further certify that I have read and understand the policies of the Graduate School with respect to the transfer of graduate credits, and I specifically understand the following:

1. Graduate credits may be transferred only from non-degree status in a regionally accredited university or college and courses where I have earned a grade of "B" or better.
2. Graduate credits may be transferred only when they can be reconciled with the requirements of the student's chosen degree program.
3. For a Master's degree, I may transfer a maximum of twelve (12) semester credit hours of whose age will not exceed seven years at the time of graduation (date on which degree is awarded from).
4. For a doctoral degree, I may transfer a maximum of six (6) semester credit hours of doctoral level courses taken at a doctoral degree granting institution, provided that those courses are comparable to courses in my doctoral Plan of Study and those six (6) credits are at an age that will render them no more than five (5) years old at the time of initial enrollment in a doctoral program at Southern University at New Orleans.
5. I must attach to the application, official transcripts of all courses that I wish to transfer, course descriptions and/or copies of catalogs from the institution(s).

_____/_____
Student's Name & Signature

Date

_____/_____
Department Chair/Program Director & Signature

Date

_____/_____
Graduate School Dean Name & Signature

Date

_____/_____
Registrar Name & Signature

Date