



TRANSFER COURSE AUTHORIZATION FORM

OBTAIN NECESSARY APPROVALS AND RETURN THIS FORM TO THE REGISTRAR'S OFFICE PRIOR TO THE START OF THE COURSE(S) TO RECEIVE ACADEMIC COURSE CREDIT. (Allow 3 weeks for the approval process.)

Student UNH ID#: _____ Date: _____

Last Name: _____ First Name: _____ Initial: _____

Student Phone: _____ Student Email: _____@unh.newhaven.edu

Name of College/University where course(s) will be taken: (use one form for each school)

Circle the term courses will be taken: Fall Intersession Winter Spring Summer 20____

College/University Course(s) (to be completed by student)			UNH Equivalent (to be completed by Advisor)			
Course #	Title/Description	# of Credits	Course # Initial	Title/Description	# of Credits	Dept. Chair Approval
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

1. Students must be in good academic standing at the University of New Haven (**at least a 2.00 GPA**).
2. All course work at another institution must be previously approved by the Registrar's Office. Only courses taken at a fully accredited college **with grades of 'C' or better** can be transferred.
3. Transfer credits ARE NOT computed into cumulative GPA, nor will credit be awarded for pass/fail courses or grades.
4. If a specific course is not yet known, the student's Chair (or designee) may indicate parameters to which the transferred course must conform, e.g., "any 200-level or higher course in Sociology."
5. **Signature of Chair from UNH department that offers the equivalent course**—necessary for course to count as major or core requirement; not necessary for course to count as free elective. The chair (or designee) of the UNH department offering the equivalent course must (also) approve in the case of a course from a 2-year institution that replaces a 300-level or higher course at UNH.

Student Signature: _____

Student's Advisor's Approval:

Name (PRINT): _____

Signature: _____

Authorization of Major Department Chair/Designated Program:

Name (PRINT): _____

International Services Office Authorization: (International Students Only)

Name (PRINT): _____

Signature: _____