



Transfer Credit Pre-Approval Form

- A Course description of the requested course(s) listed below must be submitted with this form.
- Course(s) must be taken at a regionally accredited institution of higher education.
- No more than 34 degree credit hours or 15 certificate hours may be granted as transfer credit for work completed in all of these programs combined.
- Course(s) must be taken for a letter grade, and transfer credit can only be awarded to courses completed with a grade of "C" or higher.
- All transfer credits applied to the student's record will appear with a grade of "T" (Transfer).

Name (Please print): _____ Banner ID: _____

Email Address: _____ Major: _____

My signature below indicates I understand the transfer credit requirements noted above. I understand only approved transfer credit and courses with a grade of C or better will be applied to my student record.

Student Signature: _____ Date: _____

Requested Course One:

College/University: _____ Semester/Year: _____

Subject: _____ Course Number: _____ Title: _____ Credits: _____

REGISTRAR OFFICE USE ONLY:

SUNY Adirondack Equivalency: _____ Decision: Approve Deny (see comments for further information)

Comments: _____

Requested Course Two:

College/University: _____ Semester/Year: _____

Subject: _____ Course Number: _____ Title: _____ Credits: _____

REGISTRAR OFFICE USE ONLY:

SUNY Adirondack Equivalency: _____ Decision: Approve Deny (see comments for further information)

Comments: _____

Requested Course Three:

College/University: _____ Semester/Year: _____

Subject: _____ Course Number: _____ Title: _____ Credits: _____

REGISTRAR OFFICE USE ONLY:

SUNY Adirondack Equivalency: _____ Decision: Approve Deny (see comments for further information)

Comments: _____

For Registrar's Office Use ONLY:

Registrar Staff Signature: _____ Date: _____

Copy sent to Student