



Office of the Registrar
 McAuley Hall 205
 100 Ochre Point Avenue
 Newport, RI 02840-4192
 Tel: 401-341-2943 * Fax: 401-341-2996

TRANSFER CREDIT APPROVAL FORM

Name: _____	Projected Grad Date: _____
Local: _____ (Street)	Permanent: _____ (Street)
_____	_____
(City, State, Zip Code)	(City, State, Zip Code)
Major: _____	Phone #: _____

TRANSFER CREDIT APPROVAL CRITERIA

Students may complete a maximum of three courses at other institutions after enrolling at Salve Regina.

- Courses must be taken at regionally accredited colleges and universities.
- Courses must be completed with grades of C or higher. (*Grades of C- or lower are nontransferable.*)
- Courses must be **pre-approved** by applicable department chairpersons.

STUDENT RESPONSIBILITIES

- Students with special learning needs must access reasonable accommodations, if applicable.
- Students must request official transcripts be forwarded to the Office of the Registrar upon completion of the course.

STEP 1: COURSE INFORMATION

Student completes STEP 1 with information from visiting institution.

Attach a course description from website, catalog, or other institutional publication.					
Indicate number of courses, including this one, taken off campus:			<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Course Title: _____					
Course Code: _____			Number of Credits: _____		
College/University: _____					
Semester:	<input type="checkbox"/> Fall	<input type="checkbox"/> Winter	<input type="checkbox"/> Spring	<input type="checkbox"/> Summer I	<input type="checkbox"/> Summer II
Signature: _____			Date: _____		

STEP 2: TRANSFER EQUIVALENCY

Student completes STEP 2 with equivalency determination from ONE of the following individuals, as applicable.

<p>CORE COMPLEMENT Department Chairperson</p> <p><input type="checkbox"/> Equivalent to the following course*: _____ (SRU course code) * Course must be within department.</p> <p><input type="checkbox"/> Not accepted for core complement</p> <p>Signature _____</p> <p>Date _____</p>	<p>MAJOR OR MINOR Department Chairperson</p> <p><input type="checkbox"/> Equivalent to the following course*: _____ (SRU course code) * Course must be within department.</p> <p><input type="checkbox"/> Not accepted for transfer</p> <p>Signature _____</p> <p>Date _____</p>	<p>ELECTIVE Department Chairperson</p> <p><input type="checkbox"/> Equivalent to the following course*: _____ (SRU course code) * Course must be within department.</p> <p><input type="checkbox"/> Not accepted for transfer</p> <p>Signature _____</p> <p>Date _____</p>
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STEP 3: CREDIT VERIFICATION

Signatory from STEP 2 forwards form to the Office of the Registrar for credit verification.

Status:	<input type="checkbox"/> Approved: New Course	<input type="checkbox"/> Approved: Repeat Course (<i>improved grade only; duplicate credit not granted</i>)
	<input type="checkbox"/> Not Approved	
Institution Regionally Accredited	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Remaining # of transfer courses:	<input type="checkbox"/> 1	<input type="checkbox"/> 2 <input type="checkbox"/> 3
		Notification to Student: _____