

Millersville University
College of Graduate Studies and Adult Learning

Request for Transcript Review
of Graduate Work Completed at Another Institution
Prior to Millersville University Admission

This form is to be used by graduate students seeking transfer credits for graduate work completed at another institution prior to admission to Millersville University. **Courses for which transfer credit is sought may not be more than five (5) years old prior to admission to Millersville University. No more than nine (9) credits may be transferred into a program.** The form must be completed prior to the planning of a program of graduate degree studies by the student and his/her adviser.

Student's Name _____

Student I.D. Number _____

Email Address (form approval will be sent to this email address) _____

I completed the following course(s) at the institution(s) indicated and am requesting that this course(s) be considered for transfer to my degree program at M.U. **A catalog description of the course(s) listed below is attached to this request. I have requested an official copy of the transcript(s) to be sent directly to M.U.'s College of Graduate Studies and Adult Learning.**

| To be completed by student | | | | | To be completed by adviser |
|----------------------------|--------------------|---------|---------|-------|----------------------------|
| Institution | Course No. & Title | Term/Yr | Credits | Grade | M.U. Equivalent/Elective |
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I have reviewed this student's relevant transcript(s) of the work indicated above and recommend the transfer of ___ credits to the degree program. I have noted the M.U. course equivalent by course number, or elective where appropriate.

Adviser's Signature

Date

I concur with this recommendation for the transfer of _____ credits as indicated above.

Graduate Program Coordinator's Signature

Date

The transfer of credits is Approved. Course will appear on MU transcript within 10 business days.
 Not Approved.

Graduate Dean's Signature

Date