

Request for Transfer Credit

ID : _____ Student Name: _____

[Please provide a marked copy of school transcript.]

| LN# | COURSE ID SUBJ+NUM | TITLE OF COURSE | CREDIT HRS | QUAL HRS Y/N | GRADE | INSTITUTION | START DATE | END DATE |
|-----|-----------------------|-----------------|---------------|-----------------|-------|-------------|---------------|-------------|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
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| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |

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|----------------------------------|--|--|---|
| Total Hrs / Total Qty Hrs | | | Total Hours will automatically fill. Please manually enter total Quality Hours. |
|----------------------------------|--|--|---|

Submitted by (DGS) please print name and sign: _____

Date of request :

Approved at Graduate School: _____

Grade Table:

| | |
|----|-----|
| A+ | 4.0 |
| A | 4.0 |
| A- | 3.7 |
| B+ | 3.3 |
| B | 3.0 |
| B- | 2.7 |

Remit form to the Vanderbilt University Graduate School:
117 Alumni Hall
2205 West End Ave
Nashville, TN 37240