



# School of Arts & Science

## Graduate Programs Transfer Credit Authorization

Please review both the policy and conditions information on this form, before submitting to your Department Chair and the Dean's office.

**Policy:** Graduate students may apply to use up to a maximum of six (6) credits in transfer toward a graduate degree program. No student will receive more than six (6) credits in transfer and will only receive consideration under the conditions detailed below for each course

**Conditions for Transfer Credit Application:**

1. Course work must have been completed within the past five (5) years
2. Course work must be graded 'B' or better, No Pass grade and no grade of B- will be considered in transfer
3. Course work may not have been used for or in progress for any other degree program at any other college – without exception
4. Course work must be at the and clearly delineated as graduate level, and directly related to program of study
5. Student making application must be in good standing with a 3.0 cumulative gpa or better

**Student Information (to be completed by student):**

Name \_\_\_\_\_ Iona I.D. # \_\_\_\_\_

Degree Program \_\_\_\_\_ Phone # \_\_\_\_\_

**Acknowledgement:** I have read and understand the policy and conditions noted and have requested or have already submitted a **Final Official transcript** from the school(s) noted (be sent) to the Dean's office.

Student signature \_\_\_\_\_

**Transfer Course Information (to be completed by Department Chair – including 'Explanation of Use' in current degree as equal to a course or as a substitution of a course requirement)**

1. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Course Prefix/#      Course Title / Name      Grade      Credit  
 \_\_\_\_\_ / \_\_\_\_\_  
College or University      Semester/Term and Year

This course is: (select one)      Is equivalent to      May be substituted for

Course Information and Explanation of Use

2. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Course Prefix/#      Course Title / Name      Grade      Credit  
 \_\_\_\_\_ / \_\_\_\_\_  
College or University      Semester/Term and Year

This course is: (select one)      Is equivalent to      May be substituted for

Course Information and Explanation of Use

**Authorization Needed – Prior to submission to the College Registrar for posting**

Department Chair/Graduate Program Coordinator \_\_\_\_\_ Date \_\_\_\_\_

Dean's Office Representative \_\_\_\_\_ Date \_\_\_\_\_