NOTE: If you are filing your Plan of Study at the same time, DO NOT USE THIS FORM. You may indicate your transfer credit/exemption request on the Plan of Study form itself.

TRANSFER CREDIT/EXEMPT COURSE

This form may be used for any of the following:

1) requesting **exemption** from a required graduate course.
2) requesting transfer of credit for course work **taken prior to admission,** if Plan of Study is not yet filed—MUST ATTACH COPY OF SYLLABUS (transcript on file in Graduate School)
3) requesting transfer of credit for course work **to be taken elsewhere after admission**, if Plan of Study is already on file (pre-approval)—MUST ATTACH COPY OF SYLLABUS

Please check the graduate section of the General University Catalog for information on limits of credit, grade requirements, etc. Please complete this form with your program advisor and send it to the Graduate Office for the Dean's approval. If approved, a copy will be sent to the advisor and student. A copy will be placed in the student's file in the Graduate Office.

* *

Student Name ____ Student # W______________________

Mailing Address ____

City, State, Zip ____ Telephone # ______________________

Student's Program ___________________________________ Specialization ________________________

REQUEST IS FOR **ONE** OF THE FOLLOWING:

___ 1) Exemption for a required WWU course:

Course # & Title in WWU Bulletin: ____

REASON for exemption: ____

___ 2) Accept transfer credits for course taken **prior** to admission to WWU Graduate School:

Institution where taken: ______________________________ When taken: ____________________

Course # & Title: ___________________________________ Grade: _____ # of Credits: ______

(ATTACH COPY OF SYLLABUS)

___ 3) Pre-approval for course to be taken **elsewhere** after admission:

Institution where course is to be taken: ____

Course # & Title: ____ Qtr. taking course: _________

# of Credits: _________ **(ATTACH COPY OF SYLLABUS)**

NOTE: Course work taken elsewhere must be verified by sending an official transcript, upon course completion, to the Graduate School office.

____ ____

Graduate Program Advisor signature Date Student signature Date

______ Approved

______ Not approved

____

Graduate Dean signature Date

St/Adv
rev 12/01