



**Graduate**  
**Transfer Credit Pre-Approval Form**  
**Springfield College**  
*(Available for matriculated students only.)*

Office of the Registrar  
 263 Alden Street  
 Springfield, MA 01109-3797  
 Phone (413) 748-3530

Student Name: \_\_\_\_\_ Student I.D. : \_\_\_\_\_  
 Current Address: \_\_\_\_\_ Current Phone: \_\_\_\_\_  
 \_\_\_\_\_ Campus Box #: \_\_\_\_\_  
 SC Email \_\_\_\_\_  
 Major/Program of Study: \_\_\_\_\_ Advisor: \_\_\_\_\_  
 Semester/Year Matriculated: \_\_\_\_\_ Expected Date of Graduation: \_\_\_\_\_

**DESCRIPTION OF COURSE(S) MUST ACCOMPANY THIS FORM :**

- ❖ Course(s) must be taken at a regionally accredited institution of higher education.
- ❖ A maximum of 6 to 9 credits may be accepted for transfer. (See catalog for details)
- ❖ Course(s) must be taken for letter graded, college credit. A minimum grade of "B" is required.
- ❖ Grades received are not indicated on the SC record.
- ❖ A student may not receive duplicate credit for a course already taken.
  
- ❖ **It is the student's responsibility to ensure all criteria noted above are met prior to registering for the course(s).**

Credit Hours Completed To Date: \_\_\_\_\_ # of Transfer Credits previously awarded: \_\_\_\_\_

**Course(s) to be taken:**

College/Univ: _____ Sem/Year: _____ Dept: _____ Course #: _____ Title: _____ Credits: _____ Course taken for (Circle One): MAJOR REQUIREMENT / MAJOR SELECTIVE / ELECTIVE (OFFICE USE ONLY) Comments: _____  SC Course Equivalency: _____ (note: if course is not a direct equivalent, note as elective) Dept Chair / Campus Director (SHS) signature: _____
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College/Univ: _____ Sem/Year: _____ Dept: _____ Course #: _____ Title: _____ Credits: _____ Course taken for (Circle One): MAJOR REQUIREMENT / MAJOR SELECTIVE / ELECTIVE (OFFICE USE ONLY) Comments: _____  SC Course Equivalency: _____ (note: if course is not a direct equivalent, note as elective) Dept Chair / Campus Director (SHS) signature: _____
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Student Signature	Date	Advisor's Signature	Date
Dept. Chair/ Associate Dean (SHS) signature	Date	Registrar's Signature	Date