

Transfer of Credit Request

Please read the Transfer of Credit Policy in the JCPH Student Handbook before completing this form and submitting it to the Assistant Dean for Student and Alumni Affairs.

Student Information

Student Name: _____ Campus Key: _____

Email: _____ Date Submitted: _____

Program: Graduate Certificate Master's Doctoral (PhD)

Program Name: _____

Course Information

Please attach a detailed syllabus of the transferred course and an unofficial transcript to this application. Submit one application per transferred course.

Course Number and Name: _____

Institution: _____

Grade: _____ Credits: _____ Term Completed: _____

JCPH Equivalent Course: _____

JCPH OFFICE USE ONLY

Course Reviewer: _____ Date Reviewed: _____

Request Approved

Request Denied; Reason: _____

Director, OAA (Print): _____

Director, OAA (Signature): _____ Date: _____