



Name: _____

Date: _____

Transfer Course:

Institution: _____ Semester/Year: _____

Course Number and Name: _____ Credit Hours: _____

MCCN Equivalent Course:

Course Number and Name: _____ Credit Hours: _____

Note: Transfer of credit is granted on an individual basis. A maximum of six credits of relevant course work may be considered for transfer. The decision is based on equivalent content and outcomes (for required courses), credit allotment, and satisfactory completion of courses.

Student Checklist:

- I petition for transfer credit upon application to the program or at least six weeks before the course begins
- I signed this form and attached the course syllabus from the semester and year enrolled in the course and the official transcript showing the final course grade of at least a B.
- I email this form, syllabus and the final transcript to the Graduate Advisor (kramsay@mccn.edu)

Student Statement of Understanding:

I have completed this petition and the information contained herein is accurate. My work presented for transfer credit is from an accredited college and is subject to evaluation in light of the degree requirements of the College. I understand that the faculty who teaches the equivalent course that I am requesting transfer credit or the program Director or Dean, will either approve or deny this petition. I also understand that the Department of Records and Registration will award the transfer credit on my MCCN transcript if the petition is accepted.

Student Signature

Date

Reviewer approves or denies this petition for transfer credit based on the appraisal of the course syllabus and official transcript.

Rationale:

Reviewer

Date

Program Dean or Director

Date