GRADUATE ADMISSIONS OFFICE
(724) 738-2051
SLIPPERY ROCK UNIVERSITY OF PENNSYLVANIA
SLIPPERY ROCK, PA 16057

GRADUATE STUDENT TRANSFER CREDIT FORM

FOR NEWLY ADMITTED SRU GRADUATE STUDENTS WHO WISH TO TRANSFER
GRADUATE COURSEWORK EARNED AT OTHER INSTITUTIONS
PRIOR TO ATTENDING SRU

Attached is a copy of the transcript of graduate work completed by the student named below.
Please complete the Graduate Coordinator Review portion and note your recommendation.

I. STUDENT INFORMATION

Name______________________________________________________________
(Last) (Former) (First) (Middle)

Address___________________________________________________________
(Street) (City) (State) (Zip)

Telephone No. (___)__________________

TRANSFER INSTITUTION______________________________________________

*A MAXIMUM of twelve (12) semester hours of graduate coursework earned at other accredited institutions may be accepted for transfer to Slippery Rock University before enrolling. These credits must have been completed within the six-year period established for the completion of all degree requirements and carry at least a “B” grade. No more than six (6) semester hours shall be transferred from another institution after a student has been admitted to a graduate program at Slippery Rock University.

II. GRADUATE COORDINATOR REVIEW

☐ I RECOMMEND TRANSFERRING THE CREDITS BELOW
☐ I RECOMMEND THAT NO TRANSFER CREDITS BE AWARDED

<table>
<thead>
<tr>
<th>Transfer Institution</th>
<th>Course Title</th>
<th>Course Number</th>
<th>Semester Hours</th>
<th>SRU Course Number, Title, and Equivalent Semester Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Graduate Coordinator’s Signature______________________________________________

Date________________________