

STETSON UNIVERSITY

Office of Graduate Studies

Request for Approval of Transferred Graduate Courses

Instructions: This form is to be used by a student seeking to transfer not more than six semester hours of graduate coursework to his/her degree program. A **separate request form** is required for each course being transferred. Note: courses transferred in will not be used toward Advancing to Candidacy.

The student is responsible for requesting an official transcript from the institution concerned, directly to: Stetson University - Attn: Registrar Office, 421 N. Woodland Blvd, DeLand, Florida 32723.

Required:

- Completed Transfer Request Form
- Official transcripts from transferring school sent to Stetson Registrar
- Syllabus of the course being transferred

Complete **all** sections below:

STUDENT NAME: _____

STETSON ID#: _____ GRADUATE MAJOR: _____

NAME OF SCHOOL WHERE COURSEWORK WAS TAKEN: _____

PROFESSOR: _____ DEPARTMENT: _____

COURSE #: _____ COURSE TITLE: _____

CREDIT HOURS: _____ TERM: _____ TEXT USED: _____

SUMMARY OF COURSE CONTENT:

TO REPLACE STETSON UNIVERSITY'S:

COURSE # _____ COURSE TITLE: _____

DEPT. CHAIR or FACULTY APPROVAL: _____

DATE: ____/____/____

Notes: _____

ALL FORMS MUST BE SUBMIT TO THE OFFICE OF GRADUATE STUDIES @ gradstudies@stetson.edu