

APPLICATION FOR TRANSFER CREDIT

STUDENT INFORMATION:

STUDENT NUMBER: _____ PROGRAM: _____

NAME: _____ DATE: _____

STUDENT'S SIGNATURE: _____ EMAIL ADDRESS: _____

PREVIOUS COLLEGE OR UNIVERSITY COURSE: TRANSFER CREDIT REQUESTED IN:

COLLEGE/UNIVERSITY: _____ FLEMING COURSE CODE: _____

COURSE CODE: _____ COURSE NAME: _____

COURSE NAME: _____ SEMESTER: _____

GRADE: _____

FORM MUST BE APPROVED BEFORE SUBMITTING TO THE REGISTRAR'S OFFICE

APPROVED BY:

PROGRAM/SUBJECT COORDINATOR: (PRINT) _____ DATE: _____

SIGNATURE: _____

SUBJECT COORDINATOR APPROVAL REQUIRED FOR GENERAL EDUCATION, MATHEMATICS, SCIENCE, COMPUTERS, COMMUNICATIONS, PSYCHOLOGY

- It is the responsibility of the Coordinator/Faculty to review the **course outline** and approve the content.
- It is the student's responsibility to ensure that the Registrar's Office has an official transcript on file.
- It is the responsibility of the student to ensure that course is dropped from their timetable before the 10th day of classes. Courses dropped after the 10th day of classes will receive a 'W' or a 'WF' as per the academic regulations.
- Transfer Credits may affect your course load which in turn may affect your full-time status, fees and eligibility for OSAP, scholarships, bursaries and the student health plan.
- The equivalent course may only be used once and must be a passing grade.

FOR OFFICE USE ONLY:

COURSE DROPPED FROM TIMETABLE COORDINATOR SIGNATURE VERIFIED

OFFICIAL TRANSCRIPT ON FILE TRANSFER CREDIT : VERIFIED PENDING

ENTERED/VERIFIED BY: _____

COMMENTS:

KEY PUNCHED:

The information on this form is collected under the legal authority of the Ministry of Colleges and Universities Act, R.S.O. 1980, Chapter 272, S.S., R.R.O. 1980, Regulation 640. The information is used for Administration and Statistical purposes of the College and/or the Ministries and Agencies of the Government of Ontario and the Government of Canada.