

**REQUEST FOR TRANSFER OF GRADUATE CREDIT**  
*College of Arts & Sciences, Graduate Office*

All requests for transfer of graduate credit that include courses to be counted toward Ph.D. candidacy must be considered and approved by the College before the student may be formally nominated to Ph.D. candidacy.

Please forward the student's graduate transcript (from the institution named below) with this signed form to the College Graduate Office ([coasgrad@indiana.edu](mailto:coasgrad@indiana.edu)).

**University ID Number:** \_\_\_\_\_ **Major:** \_\_\_\_\_

**Full Name:** \_\_\_\_\_

Transferred units apply to \_\_\_\_\_ degree.

If units apply to the Ph.D. degree, has the student been admitted to candidacy?\* (circle one) Yes No

Semester and year admitted to Ph.D. candidacy: \_\_\_\_\_

Total semester units of transfer credit requested: \_\_\_\_\_

Course data: (please attach original transcript or photocopy of both sides of transcript)

<b>Institution</b>	<b>City</b>	<b>State</b>	<b>Country</b>

Semester	Year	Department	Course #	Title	Unit Credit	Grade

\_\_\_\_\_  
 Director of Graduate Studies (or Graduate Advisor)

\_\_\_\_\_  
 Date

Approval:

- ( ) Request approved.
- ( ) Approved within limit of five-year rule applied to completion dates of the courses listed above.
- ( ) Approved within limit of seven-year rule applied to completion dates of the courses listed above.

\_\_\_\_\_  
 Dean College of Arts and Sciences, Graduate Office

\_\_\_\_\_  
 Date