Request for Computer Science Transfer Credit

Section 1: To be completed by the student

Demographic Information

Date: ______________________

Full Name: __________________________________________ Student ID: ______________________

Academic Advisor Name: __________________________________________

Transfer Institution Course Information

Date Course Taken: ______________________

Institution Name/Location: __________________________________________

Course Number/Title to be transferred: __________________________________________

UNCG Course Information

Proposed Course Number to receive credit: __________________________________________

Use the checklist below to assemble all relevant documentation in support of this transfer request: (initial each one completed)

_____ Course Syllabus

_____ Textbook Used (or at least the name, author, and ISBN number of the text)

_____ Samples of your work in this course

Once complete, submit this form along with your supporting documentation to your academic advisor.

Section 2: To be completed by the academic advisor

Complete the two items below and send to the course coordinator for the course in question:

Material sent to ______________________ on _________________.

Course Coordinator ______________________ Date ________________

A list of course coordinators can be found at http://www.uncg.edu/cmp/academic/courses.html
Section 3: To be completed by the course coordinator

Check the most appropriate response to the request for transfer credit below:

____ I have examined the material provided and conclude that the material covered encompasses the comparable UNCG course above. I approve granting the transfer credit.

____ I have examined the material provided and conclude that the material covered does not encompass the comparable UNCG course above. I do not approve granting the transfer credit.

Rationale: ____________________________________________________________

________________________________________________________

____ Based on the material provided, I am unable to process the request. The following material is needed before a decision can be made:

________________________________________________________

________________________________________________________

Evaluation complete. __________________________, ________________________.

Course Coordinator Date

Section 4: To be completed by the academic advisor

Based on the response from the course coordinator, complete the following by initialing and dating the most appropriate responses below:

____________ Communicate, with the student, the findings of the course coordinator.

____________ Return supporting material to the student.

____________ If the transfer request was approved, forward to the Undergraduate Director.

____________ If the transfer request was not approved,

____ the student does not wish to proceed further

____ the student will assemble more information and submit a new request.

Section 5: To be completed by the undergraduate or graduate director (or both)

Request sent to Registrar for processing.

_________________________ Undergraduate Director (for course levels 100-599) or

_________________________ Graduate Director (for course levels 500-899) – both if req’d

_________________________ Date