



DO NOT USE THIS FORM FOR INTERNATIONAL COURSES THAT ARE NOT DESIGNATED STUDY ABROAD.

Please review the following directions:

1. Courses will transfer in compliance with the UNCG Transfer Regulations detailed in the *Undergraduate Bulletin* and at the following Web site:
<http://www.uncg.edu/reg/TransferGuide/current/TransCredPol.html>.
2. You must submit catalog descriptions of courses for out-of-state institutions.
3. A final transcript of your work must be sent at the end of the term to: University Registrar's Office, UNCG, PO Box 26170, Greensboro, NC 27402-6170.
4. A passing grade (effective fall 2005, a "C" or higher) is required to receive transfer credit at UNCG.

Name: _____ Student ID#: _____ Telephone Number: _____ Date: _____

Mailing Address: _____
Street City State Zip

E-mail Address: _____ Major: _____

Class: FR SO JR SR When do you plan to graduate? Term: _____ Year: _____

Institution you wish to attend: _____

City and state of institution: _____

LIST VISITING INSTITUTION COURSES

LIST VISITING INSTITUTION COURSES			FOR OFFICIAL USE ONLY	
Department	Course No.	Course Title	Departmental Substitution/Equivalent Course	GEC

Signature Department Date University Registrar's Office Approval Date

Authorized Signature—

If course is in major, please equate or list in Departmental Substitution/Equivalent Course column as a major requirement.