

Chicago State University - Office of Graduate and Professional Studies Graduate and Professional Credit Transfer Request

Graduate and professional students who are already admitted to a degree or certificate program and have taken credits at another university may apply to have those credits reviewed for possible transfer and application to meet degree or certificate requirements. CSU policy allows transfer of up to 34% of degree or certificate credit requirements; some programs allow fewer credits. Consult the graduate catalog in effect at the term of admission for detailed policy and requirements. To be eligible for transfer, courses must: A) be graduate level, B) be comparable to those offered at CSU, C) be taken within the degree completion time allowed for the degree, D) have not been used for a prior graduate degree or certificate and E) receive a grade of B (3.0 minimum) or better. In addition, F) Request for transfer of credits to CSU should be made within 1 month of beginning the graduate program, preferably at the first advising session. If a course is taken at another university while enrolled in a CSU graduate program, prior approval of the graduate advisor and program chair must be obtained prior to enrollment, G) Approved transfer credit is posted as semester credit hours on the transcript and H) The responsibility for submitting the official transcript, syllabus for each course and for submitting to advisor/department for review and potential approval rests with the student. Instructions: 1. Complete Part 1. 2. Obtain official transcript and copy of course syllabus. 3. Meet with advisor to complete Part 2. 4. Advisor obtains signatures and submits complete packet to Office of Graduate and Professional Studies, ADM 200.

Part 1.

UID	First Name	Last Name
CSU email	Phone	Degree
		Program

I understand that it is my responsibility to request that an official transcript from the Institution be sent to the Office of Graduate and Professional Studies, that I have a copy of the transcript and course syllabus for each course to provide my advisor for review. Sign and date below.

Institution	Course #	Course Title	Credits (semester or quarter)	Term/ Year Completed	Program/Department review – note equivalency – a) CSU course #, Course Title, Credits, b) Elective Course, Credits, or c) Not approved	Advisor initials/ dates - course meets transfer policy requirements and equivalency is approved.

Part 2. Institution and Course Information for Transfer Request/ Program Review

**Part 3.
CSU Approvals (signature and date)**

Graduate Advisor _____ Date _____	Office of Graduate and Professional Studies Use --Official transcript received ____ --Course syllabus received ____ --Registrar notified of accepted credits ____
Department Chair _____ Date _____	
Associate Provost _____ Date _____	