



Pre-Approval of Transfer Credit

Student Name: _____ Student ID# _____

Current Address: _____ Current Phone Number: _____

Major: _____

Number of hours that will be completed prior to taking courses listed below: _____

Anticipated graduation date (semester/year): _____

Please indicate if you are participating in intercollegiate athletics at Truman yes no

If yes indicate sport(s) _____

Institution from which credit is to be transferred: _____

Address: _____
CITY STATE

Term and year in which the following course(s) will be completed (e.g. Spring, Summer, Fall) _____

Transfer Course Discipline & Number [ATTACH COURSE DESCRIPTION]	Title of Course	Credit Hours	Truman Course Number and Title
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If you are requesting a waiver of the 64 hour policy or the residence credit requirements, please complete this section **and attach a brief description of your reasons for such petition.** (Please refer to the Truman State University General Catalog for more information on these policies.)

- _____ I am requesting a waiver of the 64 hour policy.
- _____ I am requesting a waiver of the 28 hour residence credit requirement.
- _____ I am requesting a waiver of the residence credit requirement for my major program.
- _____ Other: _____.

Division Head (of major) approval: _____ Date: _____

Vice President for Academic Affairs approval: _____ Date: _____

Student Signature: _____ Date: _____

Advisor Approval: _____ Date: _____

Division Head (of major) Approval: _____ Date: _____

Registrar's Office Approval: _____ Date: _____

Registrar's Office
McClain Hall 104
100 East Normal
Kirksville, Missouri
63501-4221
(660) 785-4143
FAX (660) 785-7396

This form should be completed by undergraduate, degree-seeking students prior to taking courses at another institution. Attach course description(s) prior to submitting this form to your advisor. Incomplete forms will be returned to the student.

Refer to the Truman State University Catalog for policies which are applicable to transfer courses. For example:
*Residence credit requirements
Course descriptions and prerequisites
64 hour policy
Specified program/minor requirements
Sophomore Writing Experience*

Final approval for the transfer of credit is granted after all signatures are obtained. The Registrar's Office will distribute copies to the student and advisor.

It is the student's responsibility to have one official copy of the transcript sent to the Truman State University Registrar's Office upon completion of the transfer course(s).