HAMPTON UNIVERSITY
The Graduate College

Graduate College
Counselor

APPLICATION TO TAKE COURSES FOR TRANSFER CREDIT

Only fully completed forms will be processed

Name

Hampton University ID Number & Email

Current address (street, city, state and zip code) AND University email address

Telephone Number

Major field (and concentration, if any)

Catalog Year (Year of acceptance)

M.B.A. ◯ M.A. ◯ M.S. ◯ M.T. ◯ Ed.S. ◯ D.P.T. ◯ Ph.D. ◯

Degree

I wish to apply for permission to enroll in the following course(s) at:

Name of University

University Address

Fall ◯ Spring ◯ Summer ◯

Semester of which course will be taken

Year

Course at other institution (course to be transferred)				Hampton University Equivalent Course	
Course Code/Number	Course Title	Credits		Course Code/Number	Credits
			=		
			=		
			=		

A course description (a catalog copy) from the transferring institution must be submitted with this application.

No online courses from outside institutions will be approved as transfer credit.

If the requested transfer course from an outside institution is being offered at Hampton University during the requested term, then it must be approved by the Assistant Provost.

Only graduate level courses with a grade of "B" or better will be accepted for transfer credit.

Student's Signature Date

Advisor's/Program Coordinator's Signature Date

For Official Use Only

Approved ☐ Denied ☐

Graduate College Dean's Signature Date

Comments:

Revised 11/15

***Required Supplemental Information must be included with this form. Please confirm that you have included the following information with this form**

(Please check, if completed)

I have attached the Hampton University course descriptions from the academic catalog. YES ◯

I have attached the transfer institutions' course descriptions from their catalog. YES ◯

I have attached the transfer institutions' accreditation information. YES ◯

_____ _____

Student's signature Date