

Date _____

Graduate Transfer Credit Request

Name of your program: _____ ☐ Master's Degree ☐ PhD Degree

Instructions: This form is to be used to petition for courses taken outside of Brandeis University to count toward credit for the Brandeis University degree. The Department will complete and return this form to the Office of the University Registrar for evaluation. Approval will be granted according to the following guidelines:

- An official transcript accompanies this form.
- Residency credit will not be granted toward one year master's programs, however transfer credit may be used to fulfill specific degree requirements in these programs.
- For two year master's programs, a maximum of one semester of residency may be waived if the equivalent amount of transfer credit is granted. A maximum of one year residency may be granted toward a PhD program.

Last Name: _____ First Name: _____ MI: _____

ID: 2 _____ First Year in this Program: 20 _____ Mail Stop: _____

Course to Transfer	Brandeis Equivalencies
Institution: _____ Subject Code: _____ Course Number: _____ Course Title: _____ Semester/Year: _____	Equivalent Course: _____ and/or Degree Audit Requirement this course fulfills: _____
Institution: _____ Subject Code: _____ Course Number: _____ Course Title: _____ Semester/Year: _____	Equivalent Course: _____ and/or Degree Audit Requirement this course fulfills: _____
Institution: _____ Subject Code: _____ Course Number: _____ Course Title: _____ Semester/Year: _____	Equivalent Course: _____ and/or Degree Audit Requirement this course fulfills: _____

Department Chair/Graduate Advising Head _____ Date _____

Registrar's Office Use Only

Registrar Signature _____ Date _____

☐ Audit Evaluated ☐ Transcript Received ☐ Transfer Credit Posted ☐ Dept. Contacted for Clarification