

**Pre-Approval of
Transfer Credit**



Attention: Students who want to use credit from a Truman-sponsored study abroad experience toward degree requirements should use a substitution form.

Name: _____ ID#: 00- _____

Current Address: _____

Email: _____ Phone Number: _____

First Semester at Truman: _____ Anticipated Graduation Date: _____

Please indicate if you are participating in intercollegiate athletics at Truman: _____ Yes _____ No

Transfer of Credit

Institution at which course(s) will be completed: _____

Location of transfer institution: _____

Semester and year course(s) will be completed: _____

Major: _____

Will these course(s) be within your last 28 hours of coursework needed to graduate? _____ Yes _____ No

Will these course(s) be a repeat of a course(s) previously taken? _____ Yes _____ No

Please provide the subject, course number, course title, and credit hours for the course(s) you want to transfer to Truman. Use the transfer institution's subject, course number, and title. Attach course descriptions for each of the courses listed. The Registrar's Office will assign the Truman equivalent for each course in consultation with the faculty and department chair from the appropriate discipline(s).

SUBJ	CRS#	TITLE	TRUMAN EQUIVALENT	CREDIT HOURS

I understand that I must have an official transcript sent directly to the Truman State University Registrar's Office upon completion of the transfer course(s) listed above.

Student Signature: _____ Date: _____

For Office use only:	
Decision: _____	Date: _____
Registrar Initials: _____	Approved Term: _____