

NEW MEXICO HIGHLANDS UNIVERSITY

GRADUATE TRANSFER OF CREDIT

Name: _____ Student ID: @ _____

Address: _____ City: _____ State & Zip: _____

Graduate Major: _____ Emphasis/Concentration: _____

I have completed the following courses at: _____

and respectfully request that they be accepted to meet the requirements for the master's degree at New Mexico Highlands University.

DEPARTMENT	COURSE NUMBER	COURSE TITLE	GRADE	CREDITS	DATE TAKEN

NOTE: A maximum of 6 credits (or 25% only for School of Social Work, Department of Psychology, and Department of Counseling and Guidance) may be accepted in transfer from an accredited institution provided that:

- a. they were earned in residence at that institution;
- b. a minimum grade of "B" is earned;
- c. they were completed within a seven-year period from the expected graduation date;
- d. they were not used for another degree;
- e. they were earned in courses acceptable for a graduate degree at the institution where they were earned; and
- f. an official transcript has been received by New Mexico Highlands University and resides in the student's file.

I have attached the course descriptions from the institution at which the class(es) was completed or will be taken to this form.

I have attached the syllabi from the institution at which the class(es) was completed or will be taken to this form.

Student's Signature: _____ Date: _____

APPROVAL

Advisor(s): Major: _____ Emphasis: _____

Graduate Coordinator/Department Chair: _____ Date: _____

College/School Dean/Director: _____ Date: _____

Office of Graduate Studies: _____ Date: _____

NOT APPROVED: Signature & Title: _____ Date: _____

Date Received by Office of Graduate Studies: _____

Date Sent to Registrar's Office: _____

Date Received by Registrar's Office: _____