

Graduate Transfer Credit Petition Form

Student Instructions for Completing Form:

1. Review the graduate transfer credit policies on the following page.
2. Fill out the information below, indicating the original institution course and the College of Professional Studies course equivalent.
3. One petition form should be completed per institution from which you are looking to transfer credit.
 - Submit official transcripts.
 - Submit course descriptions and course syllabi for all courses from which you are petitioning transfer credit at the time of application submission.
 - Submit form and all other supporting documents via mail or fax to the address/number below.
4. Requests must be received *NO LATER* than the end of the second quarter after which a student has begun courses.
5. Once all documents are received, the request will be reviewed by the appropriate Academic Dean.
 - Students will be notified via email when a decision has been made. All decisions are final.
6. Please only fill in the yellow boxes on the following page.

Graduate Transfer Credit Policies:

Transfer credit awards are granted on a case-by-case basis under the following guidelines:

- Master degree programs allow up to 12 quarter hours of transfer credit (up to four courses).
- Certificate programs allow up to 4 quarter hours of transfer credit (one course).
- No transfer credit will be awarded to students in the Doctor of Education or the Doctorate of Law and Policy programs.
- The Transitional Doctor of Physical Therapy program will allow up to 8 quarter hours of credit (2 courses).
- Minimum course grade acceptable is a grade of a B, or 3.0 on a 4.0 scale.
- Credits must be graduate level.
- Credits are valid for a period of 7 years.
- Credits must not have been used toward any baccalaureate or advanced degree or certificate of advanced studies at another institution.
- Credits cannot correspond or overlap a course already completed or currently enrolled in at the College.
- Transferable courses must be a direct match to a specific course within the program of study at the College.



Northeastern College of Professional Studies

Student Information

First Name: _____ Last Name: _____ Middle Initial: _____
 Student ID#: _____ NU Email: _____@northeastern.edu Phone: _____

Mailing Address

Street: _____ City: _____ State: _____ Zip Code: _____

Institution Information of Which Courses Were Previously Completed

Institution Name: _____ City: _____ State: _____ Zip Code: _____

(if multiple) Institution Name: _____ City: _____ State: _____ Zip Code: _____

Academic Program at the College of Professional Studies:

Identify Current Academic Program: _____

Dept. & Course # (institution at which you took the course)	Course Title	Credits Earned	CPS Academic Program & Course Equivalent	Course Title	**Academic Advisor ONLY** # of Q.H. Awarded
<i>Example:</i> English Dept. ENG 101	Introduction to Writing	3 semester hours	BS in Liberal Studies ENG 1004	College English 1	
					Total Approved:

Academic Dean Signature: (Print): _____ (Signature): _____ Date: _____

Advisor Signature: (Print): _____ (Signature): _____ Date: _____