

REQUEST FOR TRANSFER CREDITFROM AN INSTITUTION OTHER THAN AQUINAS COLLEGE

STUI	DENT:								
CURRENT SCHOOL/PROGRAM OF:									
INST	NSTITUTION: NAME CITY							Y	
ΓER	м оғ Ѕти	J DY:	YEAR		FALL		SPRING		SUMMER
OUR	SES DESII	RED		AQUINA	AS EQU	IVALENT			
Dept.	Course #	Credit	Title		Dept.	Course #	Credit	Title	
	ONALE:								
	Associa 2. In orde -	idity, this rate Provost r to receive A grade An offic	a, and the Vice President e academic credit: e of "C-" or higher must	and dated by the Student of Academics, then rest be earned. ecceived in the Office of	eturned to	the Office	of the Reg	istrar.	
-	Student						-	Date	
	Advisor						Date		
	Director of I	Financial A	xid				-	Date	
	Dean or Ass	ociate Prov	vost				-	Date	
	Vice Preside	ent for Aca	demics				-	Date	