



Application for Transfer of Credit

Emmitsburg, MD

Registrar@msmary.edu

Phone: 301.447.5215

Fax: 301.447.5811

STUDENT RESPONSIBILITIES:

1. Discuss your plan with your advisor.
2. Check the website of the transfer institution for transfer equivalency. Provide a catalog course description for the course(s) you plan to take with this form.
3. Obtain signatures from your advisor and the department chair of the corresponding transfer course (for major courses only), and signature of the Associate Provost if the course is intended for use in the Core sequence.
4. Once this form has been completed and signed, submit this form to the Associate Registrar.
5. Upon completion of course work, you **MUST** have an official transcript sent to:

Registrar's Office

**Mount St. Mary's university
16300 Old Emmitsburg Road
Emmitsburg, MD 21727**

ELIGIBILITY:

See the latest Mount St. Mary's University catalog for policies regarding "Transfer of Credits" and repeating courses.

- a. A final grade in course(s) of C- (1.7) or better is **required** for transfer.
- b. A maximum cumulative total of twelve credits may be transferred following initial matriculation at MSMU. A student ordinarily may transfer to MSMU **no more** than 75 credits total.
- c. Credits transfer back to MSMU as grade of "P" for Pass.
- d. Electives and courses in the minor are generally accepted for transfer; a limited number of major courses are usually permitted, subject to Department Chair's approval; core curriculum courses ordinarily must be taken at MSMU.
- e. Once a student has achieved 75 total credits (including transfer credits), courses may only be taken at four-year institutions.

Student Name: _____ ID #: _____ Class: _____

Mailing Address: _____
Street City State Zip

COLLEGE OR UNIVERSITY YOU PLAN TO ATTEND _____ TERM _____ YEAR _____

REASON FOR REQUEST: _____

COURSE TITLE and NUMBER: _____

Credits

MSMU COURSE EQUIVALENT (if any): _____

Credits

SIGNATURES OF APPROVAL:

Faculty Advisor Date Department Chair (for major courses only) Date

COURSE TITLE and NUMBER: _____

Credits

MSMU COURSE EQUIVALENT (if any): _____

Credits

SIGNATURES OF APPROVAL:

Faculty Advisor Date Department Chair (for major courses only) Date

_____ has permission to take the course(s) indicated above for transfer to MSMU.

Student Name

Signature of Associate Registrar

Date