

Transfer credits will not be reviewed without official transcripts on file. Requests for transfer credit must be submitted with your application for admission. The university accepts a maximum of 6 semester hours in transfer credits from regionally accredited institutions with the approval of the Graduate Program Chair. Transferred courses are only valid if taken within six years of your anticipated date of graduation.

Applicants Last Name (legal name) _____ First Name _____ Middle Initial _____ Maiden Name _____

Mailing Address (P.O. Box, RFD, Street) _____ City _____ State/Province _____ Zip _____ Country (if other than US) _____

Home Telephone Number _____ Work/Cell Telephone Number _____

Banner ID Number _____ Expected Date of Graduation _____ E-mail Address _____

I request the following course(s) be transferred into the program to which I am applying. I understand that the course(s) must be from a regionally accredited institution, taken for graduate credit, that I must have received a grade of "B" (3.0) or better, and that the course(s) must not have been used to fulfill requirements for another degree.
NOTE: The university accepts a maximum of 6 semester hours in transfer credits from regionally accredited institutions.
Send official transcripts to: Admissions Office, Fitchburg State University, 160 Pearl Street, Fitchburg, MA 01420

Courses From Other Institutions

Institution	Course Number	Course Title	# of Credits	Semester/Year Taken	Program Chair Use Only	
					<input type="checkbox"/> App. <input type="checkbox"/> Not App.	Fitchburg State equivalent
					<input type="checkbox"/> App. <input type="checkbox"/> Not App.	Fitchburg State equivalent
					<input type="checkbox"/> App. <input type="checkbox"/> Not App.	Fitchburg State equivalent

Twelve semester hours of Fitchburg State University credit taken within a year prior to the student's admission may be applied to the degree program with the approval of the Program Chairperson. No more than six semester hours of course work at the 6000 level may be applied toward a degree program.

Fitchburg State University Courses

Institution	Course Number	Course Title	# of Credits	Semester/Year Taken	Program Chair Use Only	
					<input type="checkbox"/> App. <input type="checkbox"/> Not App.	Used as Elective <input type="checkbox"/> Yes <input type="checkbox"/> No
Fitchburg State University					<input type="checkbox"/> App. <input type="checkbox"/> Not App.	Used as Elective <input type="checkbox"/> Yes <input type="checkbox"/> No
Fitchburg State University					<input type="checkbox"/> App. <input type="checkbox"/> Not App.	Used as Elective <input type="checkbox"/> Yes <input type="checkbox"/> No
Fitchburg State University					<input type="checkbox"/> App. <input type="checkbox"/> Not App.	Used as Elective <input type="checkbox"/> Yes <input type="checkbox"/> No
Fitchburg State University					<input type="checkbox"/> App. <input type="checkbox"/> Not App.	Used as Elective <input type="checkbox"/> Yes <input type="checkbox"/> No

Applicant's Signature _____ Date _____

Graduate Program Chair Signature _____ Date _____

Dean's Signature _____ Date _____

Print Form