

**GRADUATE STUDENT PETITION FOR APPROVAL OF (NON-UB) TRANSFER CREDITS**

Each **graduate program will determine the applicability** of previous graduate courses proposed for transfer credit.

- Only those graduate courses completed at accredited or recognized institutions of higher education and with **grades of "B" or better are eligible** for consideration for transfer credit.
- Courses with **grades of "S" or "P" are not transferable** unless the student or department provides written documentation from the instructor of the course, a department administrator, or the registrar at the transfer institution that the "S" or "P" graded course was equivalent to at least a B grade.
- **No more than 20% of a master's program** may be comprised of credits from another graduate academic program at UB, other accredited higher education institutions, or a combination thereof. For example, students pursuing a 30-credit UB master's degree may transfer up to 6 credits into their program.
- Transfer credits for the **doctoral degree may constitute no more than one-half the total credits** for that degree program.
- Transfer credits will be formally approved and recorded on the student's UB record only after the Graduate School or International Admissions has received the official final transcript.

**STUDENT INFORMATION:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

UB Person Number \_\_\_\_\_ E-mail \_\_\_\_\_

Department \_\_\_\_\_ Master's \_\_\_\_\_ Doctorate \_\_\_\_\_

**TRANSFER CREDITS INFORMATION:**

**Please list all transfer courses to be applied to your current degree program. You MUST attach the original official corresponding transcript(s).** *If you are an international student who has previously submitted original transfer transcripts to UB upon admission, a photocopy of that transcript is sufficient.*

Course Title	Course Number	Credit Hours	Institution	Semester Completed

**TOTAL (NON-UB) TRANSFER CREDITS:** \_\_\_\_\_

**REQUIRED SIGNATURES:**

Student \_\_\_\_\_ Date: \_\_\_\_\_

Major Advisor \_\_\_\_\_ Date: \_\_\_\_\_

Dept. Chair/Director of Graduate Studies \_\_\_\_\_ Date: \_\_\_\_\_

The Graduate School \_\_\_\_\_ Date: \_\_\_\_\_

**FINAL ACTION TAKEN:**     **Approved**         **Denied**

Comments: \_\_\_\_\_

<b>GS use only</b>
GDB _____
PDB _____
HUB _____
E-mail _____
Copies _____