

Transfer Credit Pre-Approval Form
Undergraduate Program of Study
 FOR USE BY CURRENTLY ENROLLED UCA STUDENTS ONLY

General Education courses that are listed on the ADHE website do not need pre-approval. Check here before using this form. <http://acts.adhe.edu/studenttransfer.aspx>

Initialing the listed items signifies your knowledge of the process and responsibilities of this form.

- _____ Secure written approval from the chair of the major/minor department or Director of the UCA Core, prior to enrolling in course(s) at another institution.
- _____ **Approved course(s) will be recorded upon receipt of an official transcript. OFFICIAL TRANSCRIPT MUST BE SUBMITTED TO THE REGISTRAR OFFICE WITHIN 30 DAYS OF COMPLETING THE COURSE.**
- _____ Transfer credit is awarded for courses in which an A, B, or C grade is earned. The grade does not transfer, only the credit hour value.
- _____ Any courses taken outside of the U.S., must be evaluated by International Education Evaluations, Inc. For more information visit: <http://uca.edu/international/>

_____ Student Name (Please print clearly) _____ UCA ID Number _____ Student Signature

| Transfer Course(s) From (<i>one college per form</i>) | State | Term Taken |
|---|-------|------------|
| | | |

| Transfer Courses | | | | UCA Equivalent Course | |
|------------------|---------------|--------------|-------|-----------------------|---------------|
| Dept. Prefix | Course Number | Course Title | Hours | Dept. Prefix | Course Number |
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THE FOLLOWING APPROVALS MUST BE MADE BY THE APPROPRIATE PERSONNEL

_____ Department Chair Name (Please print clearly) _____ Chair Signature *Please make a copy for your records.* _____ Date

Initialing this box will indicate that the approved major/minor course(s) will be a permanent transfer for this department.

_____ Signature Director of the UCA Core, Jacob Held, Irby 118E *Please make a copy for your records.* _____ Date

Initialing this box will indicate that the approved general education course(s) will be a permanent transfer.

| OFFICE OF THE REGISTRAR USE ONLY | | | |
|----------------------------------|--|----------------------|--|
| Logged: | | Processed Date/Intl: | |
| Comments: | | | |

Submit this form to the Office of the Registrar, Harrin Hall, Suite 224