

## Clayton State University School of Graduate Studies Application for Transfer of Graduate Credits

Note: Official transcripts must be on file with the School of Graduate Studies before transfer credit can be approved. Credit taken after admission to CSU should be cleared with the Graduate Program Director in advance. Students may transfer a maximum of six semester hours with a grade of no less than a "B" in each course. Courses may not be older than 7 years at the time of degree completion.

| Name: Identification Number: _   |   |                                    |                       |                          |                       |
|----------------------------------|---|------------------------------------|-----------------------|--------------------------|-----------------------|
| Degree: MA _                     | MHA _                                   | MBA                                | MSN                   |                          |                       |
| MAS                              | MAT _                                   | MS                                 | MPA                   |                          |                       |
| Field of Study                   | :                                       |                                    |                       |                          |                       |
|                                  | lete this section<br>lited college or t | when requesting tra<br>university. | ansfer of graduat     | e credit earned at a     | a regionally          |
| Name of instit                   | ution requesting                        | credit be transferre               | ed from:              |                          |                       |
| Course ID<br>Number              | Course Title                            | Grade<br>("B" minimum)             | Semester<br>Completed | Semester<br>Credit Hours | Comparable CSU course |
|                                  |   |                                    |                       |                          |                       |
|                                  |   |                                    |                       |                          |                       |
|                                  |   |                                    |                       |                          |                       |
|                                  |   |                                    |                       |                          |                       |
|                                  |   |                                    |                       |                          |                       |
| Student's Signature              |   |                                    |                       |                          | Date                  |
|                                  |   |                                    |                       |                          |                       |
| Graduate Program Director        |   |                                    |                       |                          | Date                  |
| D C 1 1                          | - C - 1 + C                             | 1                                  |                       |                          |                       |
| Dean, School of Graduate Studies |   |                                    |                       |                          | Date                  |