

**Transfer Credit Appeal**  
**Undergraduate**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

EMPLID: \_\_\_\_\_ SEMESTER OF ENTRY: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ \*EMAIL: \_\_\_\_\_

This form should only be used if *your transfer credit deadline has passed* and needs to be accompanied by supporting documentation as “checked-off” below. **\*\*Any change to a student’s credit evaluation may result in the loss of financial aid eligibility\*\***

Choose one or more from the options below. *If your request does not fall into one of these categories, please inquire with the TSSC.*

- ☐ Evaluate outstanding courses requiring academic department review
- ☐ Add missing transfer courses from \_\_\_\_\_ for \_\_\_\_\_ semester
- ☐ Add degree notation from \_\_\_\_\_ college/university
- ☐ Add courses to second degree (The “Second Bachelor’s Degree - Transfer Credit Request” form should accompany this appeal)
- ☐ Re-Evaluation for (list courses) \_\_\_\_\_

Briefly describe the reason deadline was missed:

\_\_\_\_\_  
\_\_\_\_\_

*For Office Use Only:*

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Initials: \_\_\_\_\_ Date: \_\_\_\_\_

New Transfer Credit Deadline Date/ Comments:

**\*Note:** After submitting this appeal you will be contacted by email. Please be sure to provide your preferred email address. Please allow 2 weeks for decision to be made.

Rev: 2/2016