

**Undergraduate Transfer Credit
Information Request**

Transfer ____ Freshman ____

NAME: _____ **DATE:** _____

EMPLID: _____ **SEMESTER OF ENTRY:** _____

TELEPHONE: _____ **EMAIL:** _____

REQUEST: (Please name all colleges and courses involved)

For Office Use Only:

Approved by TSSC: _____

Initials: _____

Reviewed by TAP: _____

Date: _____

Denied: _____

Comments: _____