



PETITION TO TRANSFER CREDIT MASTER'S PROGRAMS ONLY

(See your PROGRAM HANDBOOK for policies that apply to transfer credit)

DIRECTIONS: Please complete and sign this petition and turn it in to the Graduate Academic Counselor, Jose Tavarez, 114L Hinds Hall, 315-443-5601, jltavare@syr.edu. Submit a separate petition for each course to be transferred. Please fill out in duplicate, a copy of the approved/denied petition will be mailed to your home address within 10 days.

NAME: _____ SUID: _____

ADDRESS: _____

DATE: _____ EMAIL: _____

DEGREE PROGRAM: _____

I petition to transfer _____ (#) credits from _____ (institution)
for (Graduate Course/Number/Title) _____
completed on _____ (date).

I enclose a catalog description of the course being transferred.

An official transcript showing the course and grade has been sent/will be sent by _____

I understand and confirm that this course did not count toward my undergraduate degree.

The paragraph below explains how the transfer of this course assists me in accomplishing my program goals:

Required Signatures

Student: _____ Date: _____

This petition to transfer credit hours is: APPROVED / DENIED

Director of Student Services: _____ Date: _____