



Request for Transfer Credit – Doctoral

Criteria and Instructions Criteria for Transfer Credit:

1. Only graded courses (not research hours) are subject to transfer.
2. The course must have been regularly offered (not special problems or individual study) by a regionally accredited graduate school.
3. The course must have been a bona fide graduate level course, approved for graduate credit and taught by a member of the graduate faculty.
4. The course must appear on an official transcript as graduate credit from the institution offering the course.
5. The course grade must be a "B" or "A." (The student's UA grade-point average will NOT include grades from transfer courses.)
6. The course must be approved by the student's major adviser and be applicable to the degree requirements at the University of Arkansas.
7. The course must not have been taken by correspondence or for extension credit.
8. The course must be acceptable to the department/program concerned (with the appropriate signature by the department/program chair/head/director) and to the Graduate Dean.
9. The course must have been taken within the seven-year time limit of the student's program at the University of Arkansas.
10. The transcript must say either that the student was admitted to a doctoral program, the course work was completed after an earned master's degree, or a master's degree was not earned while the student was attending the institution.

International Institutions: Petition for the transfer of credit from foreign universities may be made to the Graduate Dean by the department/program.

Instructions: Please complete the following information. If you are transferring all courses for a term, list the term or terms. If you are transferring selected classes, please list each class separately.

If there are multiple pages of classes listed, the advisor and department head must sign all pages.

Doctoral Transfer Credit Request

Student's Name: _____ ID Number: _____

Program: _____ Student Email: _____

By signing below the student attests the transfer credit requested meets the criteria above:

Student Signature: _____

For Entire Terms: List Term(s) and year(s) below:

Name of Institution: _____

For Specific Classes:

Name of Institution: _____

1) Course: Title: _____

Subject & Catalog # _____ Term/Year: _____

2) Course: Title: _____

Subject & Catalog # _____ Term/Year: _____

3) Course: Title: _____

Subject & Catalog # _____ Term/Year: _____

Advisor's Signature: _____

Department Head: _____