

TRANSFER OF CREDIT APPLICATION - Records and Registration Office/State University of New York at New Paltz

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Your Student ID Number

A MATRICULATED NEW PALTZ STUDENT MAY TRANSFER CREDIT IF:

1. The course(s) is approved in advance.
2. The grade earned is "C-" or above. A grade of "S" or "P" will be accepted if the course is not required for your major, for General Education, or for a requirement in an Education curriculum.
3. The institution from which you are transferring the course is accredited.
4. Your cumulative grade point average at New Paltz is 2.00 or above.
5. This course is NOT within your last 15 credits at New Paltz (New Paltz residency requirement).

NOTE: Only credits can be transferred. Grades earned elsewhere are not calculated into the New Paltz grade point average.

PRINT: Last Name _____ First _____

Permanent Address _____

City _____ State _____ Zip _____

Expected date of Graduation _____ Major (if declared) _____

Semester and year course will be taken _____ Institution where course will be taken _____

Office Use Only:
CEEB Code

WHEN THE COURSE IS COMPLETED YOU MUST HAVE AN OFFICIAL TRANSCRIPT MAILED TO:

State University of New York at New Paltz
Registrar's Office - HAB 19
500 Hawk Drive
New Paltz, NY 12561-2439

THIS SECTION MUST BE COMPLETED PRIOR TO OBTAINING SIGNATURES BELOW:

- The credits are within my last 15 credits at New Paltz: Projected Graduation Date: _____
 No Yes If Yes, special permission for exceptional circumstances may be granted by the dean of the major department.
- Total number of credits transferred to New Paltz to date
 - a) From a 2-year college _____ (70 maximum)
 - b) From a 4-year college _____
 } Combined total may not exceed 90

Signature of Dean

Please obtain the appropriate signatures according to the category or categories of the course(s) you wish to transfer.

GENERAL EDUCATION, COLLEGE-WIDE REQUIREMENT OR FREE ELECTIVE

CRSE. #	CRSE. TITLE - OTHER COLLEGE	CR	CRSE. #	CRSE. TITLE - NEW PALTZ EQUIVALENT	CR	LA	UD	G.E. CATEGORY	SIGNATURE OF DIRECTOR OF ACADEMIC ADVISING (WSB 03-D)

MAJOR, MINOR OR CURRICULUM REQUIREMENT

CRSE. #	CRSE. TITLE - OTHER COLLEGE	CR	CRSE. #	CRSE. TITLE - NEW PALTZ EQUIVALENT	CR	LA	UD	G.E. CATEGORY	SIGNATURE OF DEPARTMENT CHAIR OF YOUR MAJOR

I certify that the above information is accurate: _____
Student Signature **Date**