

Simmons College

School of Management (SOM), Graduate Student Petition to Transfer Credit

Under special circumstances, a student may receive credit for graduate work completed at another accredited graduate institution. SOM will allow transfer of credit for up to two courses not to exceed eight (8) credits. Students must complete the transfer of credit form, obtained from the department or program office, and submit it to the department chair for approval and processing. The guidelines are as follows:

1. Credit is not granted for more than the face-value credit assigned by the host institution.
2. The lowest grade normally accepted for transfer credit is B.
3. Quarter-hour credits transfer at two-thirds of a semester hour.
4. An official college/university transcript must accompany the transfer of credit form.
5. A copy of the catalog course description or syllabus must accompany the transfer credit form.
6. No credit is given for courses completed toward another degree.
7. Transfer credit only transfers credit, and not the grade.
8. No credit is given for courses taken more than five years before the date of the application for transfer of credit.

For courses completed before admission to a SOM program, transfer petitions will be considered only within six months of acceptance to the program unless approved by the program director or associate dean. After admission to the SOM program has been granted, a transfer credit form must be completed and approved prior to enrolling in courses at other institutions. The transfer of credit form can be obtained from the department office and should be submitted to the department chair for approval and processing.

Name _____ Student ID Number _____

Address _____ SOM Program /Major _____

_____ Telephone Number _____

Course number _____ Course title _____

Name of institution where course(s) taken _____

Specific dates when course(s) will be taken _____ to _____ (month & year)

Number of credits to be transferred _____. Are they semester hours or quarter hours? (circle one)

Student signature _____ Date _____

SIGNATURES OF APPROVAL:

Department Chair _____ Date _____

Associate Dean _____ Date _____

Registrar _____ Date _____

Distribute to: Registrar (original) Associate Dean Department Chair Student