TRANSFER OF GRADUATE COURSE FORM

Transfer of graduate courses does not apply to the Psy.D. Program.

Transferred courses with a grade of “B” or above, completed within the last five years, will be applied only after the student has matriculated. Students are permitted to transfer up to six credits from institutions other than Chestnut Hill College. Workshops or life experience cannot be considered for academic credit. The courses must be from an accredited institution and must be compatible with the program of study. Transfer credits will not be considered in calculating the student’s Grade Point Average (GPA).

Official transcripts must be on file and course descriptions, and syllabi must be submitted for review.

Student’s Name: __________________________________________________________

Date Matriculated: __________________________ Degree Program: __________________________

Institution Where Course was Completed: __________________________________________________________

Course Number and Title Previously Taken: __________________________________________________________

Accepted CHC Course Equivalent: __________________________________________________________

Number of Credits: _______ Grade Earned: _______ Year Completed: _______ Check One: ☐ Required ☐ Elective

Institution Where Course was Completed: __________________________________________________________

Course Number and Title Previously Taken: __________________________________________________________

Accepted CHC Course Equivalent: __________________________________________________________

Number of Credits: _______ Grade Earned: _______ Year Completed: _______ Check One: ☐ Required ☐ Elective

COMMENTS:
________________________________________________________________________________________________________________________

_________________________________________________  _____________________
Student Signature Date

Advisor Signature Date

Chair/Coordinator/s Signature Date

Dean Signature Date

Graduate School Representative Signature Date

Return to: Graduate School, St. Joseph Hall, 3rd Floor, Room 378 or Scan and E-Mail to gradschool@chc.edu

Please do not return the form until all required signatures (with the exception of the signature of the Dean) are obtained. Any incomplete forms will be returned to the student. A Graduate representative will get the completed form to the Dean for review and signature.

Copies to: Student, Student File, Faculty Advisor, Department Chair/Coordinator

9601 Germantown Avenue Phone: 215.248.7170 E-Mail: gradschool@chc.edu
Philadelphia, PA 19118 Website: www.chc.edu

2021-2022