



For Office Use Only

Posted By: \_\_\_\_\_ Date Posted: \_\_\_\_\_

**Office of the Registrar**

## Graduate Request for Transfer Credit

### STUDENT INFORMATION

Student ID: \_\_\_\_\_ Name: \_\_\_\_\_  
Last Name First Name Middle Name  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Matriculation Term and Year:  Fall  Spring  Summer 20\_\_\_\_

### UNIVERSITY INFORMATION

Institution Attended: \_\_\_\_\_ City, State/Province, Country of Institution: \_\_\_\_\_

### TRANSFER COURSE INFORMATION

Transfer Course Information <small>Course information should be entered by the student and must be copied identically from transcript.</small>							Equivalent Rice Course <small>Course Information should be from the Course Catalog.</small>			Department Approval	
Term and Year Taken	Subject Code	Course Number	Course Title	Quarter or Semester	Credit Hours	Grade	Subject Code	Course Number	Course Title	Credit Hours	Approval
				<input type="checkbox"/> Quarter <input type="checkbox"/> Semester							<small>Printed Name and Campus Extension</small>  <small>Approval Signature</small> <span style="float: right;"><small>Date</small></span>
				<input type="checkbox"/> Quarter <input type="checkbox"/> Semester							<small>Printed Name and Campus Extension</small>  <small>Approval Signature</small> <span style="float: right;"><small>Date</small></span>
				<input type="checkbox"/> Quarter <input type="checkbox"/> Semester							<small>Printed Name and Campus Extension</small>  <small>Approval Signature</small> <span style="float: right;"><small>Date</small></span>
				<input type="checkbox"/> Quarter <input type="checkbox"/> Semester							<small>Printed Name and Campus Extension</small>  <small>Approval Signature</small> <span style="float: right;"><small>Date</small></span>

### STUDENT SIGNATURE

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_