

Thunder Bay Campus 1450 Nakina Drive Thunder Bay, ON P7B 0E5 F: 807-473-3731 Admissions F: 807-473-3731 E: admissions@confederationcollege.ca

Transfer Credit Request Form

Full Name:	Student ID#: 1 0 0
Program:	Email:
Confederation College course I am requesting credit for:	
Course Code: Course Title:	
Previous Post-Secondary Institution Course Information:	
Previous Post-Secondary Institution:	
Course Code: Course Title:	
Course Mark: (minimum grade of 60%/C or 70%/B is required depending on the program)	
The following documents are required for your transfer credit request to be processed:	
Course outline or syllabus of course taken at previous institution - short course descriptions are not sufficient	
Transcript from your previous institution *(International transcripts must be assessed prior to submission) *	
 Only request forms with all required documents will be processed Transfer Credit Fees: \$25 per request, or \$50 for two or more (if all are submitted at the same time) Fees are non-refundable Allow 4-6 weeks for processing. Approved transfer credits do not qualify for tuition reimbursement. Transfer Credit requests are final and not subject to appeal If you are enrolled in the course for which you are requesting transfer credit, continue attending until you receive official approval of your request. International transcripts will not be accepted without an assessment. 	
🔲 I have read and understand the College policy on Transfer Credit and confirm that this application is accurate and complete.	
Student Signature:	Date:
FOR OFFICE USE ONLY (Admissions)	
Pre-Approved (if not forward) Student Notified Entered in Ba	
Forwarded to:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:Date:D	Fee Charged: 🛄 \$25 🛄 \$50
FOR OFFICE USE ONLY (Coordinator)	
Approval Approved for this student ONLY	
Approved for ALL students	
Denied	
Coordinator Signature:Date:	
Comments:	