



Thunder Bay Campus
 1450 Nakina Drive
 Thunder Bay, ON P7C 4W1
 F: 807-473-3731

Regional Campus
 Distance Education
 F: 807-473-3731
 E: admissions@confederationcollege.ca

Transfer Credit Request Form

| | |
|------------|--------------------------------------|
| Full Name: | Student ID#: 1 0 0 _ _ _ _ _ |
| Program: | Email: _____@confederationcollege.ca |

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 is required)

The following documents are required for your transfer credit request to be processed:

- Course outline (and syllabus if available) of course taken at previous institution - short course descriptions are not sufficient
- Transcript from your previous institution

- ◆ Use one form for each course request
- ◆ 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**
- ◆ Transfer Credit requests are final and not subject to appeal
- ◆ If you are currently attending the course you are requesting a transfer credit for, continue attending until you are notified that your transfer credit request has been approved

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 no forward) Student Notified Entered in Banner

Forwarded to: _____ Date: _____ Fee Charged: \$25 \$50

FOR OFFICE USE ONLY (Coordinator)

Approval Approved for this student ONLY

Approved for **ALL** students

Denied

Coordinator Signature: _____ Date: _____

Comments: _____