

REQUEST FOR TRANSFER OF CREDIT

*The Graduate School
State University of West Georgia
Carrollton, GA 30118*

Name _____

Address _____

Home Telephone Number _____ Work Telephone Number _____

Social Security Number _____ Date _____

Degree: Ed.D.

Major _____

Number & Title of Course to be Transferred	Number of Hours to be Transferred*	Institution Where Course was Taken/Year	To be Included in Program of Study at UWG?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**In the Ed.D. degree program in School Improvement a maximum of 9 semester hours of graduate credit may be transferred from another accredited institution subject to the following conditions: (1) work must have been completed within ten years of the date of admission to the Ed.D. degree program; (2) work must have been applicable toward a graduate degree at the institution where the credit was earned; (3) work offered for transfer must have the approval of the student's advisor, the Ed.D. director, and the Dean of the Graduate School; (4) courses to be transferred must have been taken post Master's degree; (5) a grade of B or higher must have been earned in the course.*

SPACE BELOW FOR OFFICIAL USE

Ed.D. Director

Date Approved by Ed.D. Director

Dean of the Graduate School

Date Approved by Graduate Dean