SPRING ARBOR UNIVERSITY

Transfer Approval Request Form

I request that the courses listed in the table below be considered for transfer credit to fulfill requirements at Spring Arbor University.

Check each box below to indicate that you understand your responsibilities and transfer policies.

- ☐ I understand that I must ask the transferring school to send an official transcript to the registrar's office at Spring Arbor University when a final grade posted.
- ☐ I understand that courses will be transferred only if I have earned a grade of "C" (2.0) or better. Passing grades outside of the standard A, B, C, etc. grading scale must indicate a minimum grade of "C."
- ☐ I understand that a maximum of 80 semester hours may be transferred from a two-year institution. (Other maximums for non-college credit is listed in the academic catalog.)
- ☐ I understand lower-level courses (numbered 100-299 or 1000-2999) will not be transferred as upper-level credit at SAU except as part of an articulation agreement or by approved petition. This means that if the transfer course I am taking is meant to fulfill an SAU upper-level (300-499) course requirement, I may have to take additional upper-level courses to fulfill the upper-level graduation requirement at SAU.
- ☐ I understand quarter hours, trimester hours, and clock hours will be converted to semester hours.
- ☐ I understand that if I do not take the course listed in the time specified below, this approval request will be null.
- ☐ I understand that grades for transfer courses do not calculate into the SAU GPA. SAU grades will not be replaced by transfer courses taken as retakes of an SAU course.

Term and Year you plan to take the course/s or exam/s: Term: _____ Year: _____

(If the course or exam is not taken for the term and year expected, approval may be withdrawn. A review of the course and description will be conducted for the term and the year the course was taken.)

College or ACE Recommended Organization	Dept.	Number	Course Title	Credit	**OFFICE USE ONLY**						
					SAU Equivalent Course	*Applies to the program requirements as the following*				*Approve*	*Deny*
						Gen. Ed.	Major	Elective	Other		
Example: Jackson College	*Example: ENG*	*Example: 101*	*Example: Composition I*	*Example 3*	*Example: ENG 103*	☐	☐	☒		☒	☐
						☐	☐	☐		☐	☐
						☐	☐	☐		☐	☐
						☐	☐	☐		☐	☐
						☐	☐	☐		☐	☐
						☐	☐	☐		☐	☐
						☐	☐	☐		☐	☐
						☐	☐	☐		☐	☐

Student Signature:_____ Print Name: _____

ID #: _____ SAU email address: _____

SAU Status: ☐Current ☐Prospective ☐Past (last semester attended): _____

Major:_____ Minor (if applicable): _____

Reason for denial, or conditions, or comments:

_____ _____

Registrar's Office Signature Date

Revised 7/27/21 SJH