

TRANSFER CREDIT PERMISSION

Undergraduates are required to complete this form before taking courses at an external institution for transfer credit.

The following criteria apply:

- A course will **not transfer if it has already been completed or failed at West Chester University.**
- All transfer courses must be taken for a letter grade. Please note that course credits, not the grade, will transfer to WCU.

Reminders:

- Transferred courses **may not satisfy certain WCU course designations.** Please review the catalog policy regarding [General Education and Baccalaureate Requirements](#). Contact your Academic Advisor regarding your major/minor requirements.
- Contact the Financial Aid Office, if you plan to use financial aid to pay for these courses. If you take courses off campus during fall/spring semesters and are not enrolled in WCU classes your financial aid eligibility may be impacted.

Student Name: _____ **Major:** _____ **Date:** _____

Student Signature: _____ Is this an internship? Yes No

Name of Visiting College/University: _____

Term (Select one): Fall Winter Spring Summer **Year:** _____

Check the online *Transfer Credit Center* for course equivalency information at www.wcupa.edu/transferCredit.

STEP 1: Complete boxes below. If a WCU equivalency is listed in the Transfer Credit Center, no Dept. Signature is needed.				STEP 2: If there is no WCU equivalency in the Transfer Credit Center, send to Dept. Chair for review along with the course description or syllabus.		
Course Title (Example: HIS 101)	Credits	WCU Course Equivalency from Transfer Credit Center	Credits	Signature of WCU Dept. Chair that oversees the Course Subject Area	Date	Establish Permanent Equiv.

- For additional information on transferring credits, please visit <https://www.wcupa.edu/registrar/nonWCUCredits.aspx>
- **Return this form to the Registrar's Office before taking courses.** At the completion of the course, please send your official transcript to:
 - Electronic Transcript: transfercredits@wcupa.edu.
 - Mailed Transcript: West Chester University, Office of the Registrar, 25 University Avenue, West Chester, PA 19383.

Office Use Only

Processed by: _____ Date: _____ Copy emailed to student: _____