STANTON UNIVERSITY
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Transfer Credit Application Form

This form is for students who wish to have their credits from previous colleges/universities be evaluated and be used toward their degree requirements at SU. Applications will not be considered unless accompanied by all required documentation. Upon receipt of this application together with transcripts and other supporting documents, SU will determine the number of credits to be transferred.

Transfer credit policy: Credit is evaluated on a course-for-course basis, requiring that course descriptions and credit values be comparable. Grades from transfer credits do not compute into your GPA. The following criteria must be met in order to be considered for transfer of credit

For associate level programs: The grade must be C or higher, and the maximum number of transferable credits is 45 quarter units.
For bachelor level programs: The grade must be C or higher, and the maximum number of transferable credits is 128 quarter units.
For graduate level programs: The grade must be B or higher, and the maximum number of transferable credits is 12 quarter units.

Notes: (1) These criteria may not apply to programs that lead to a profession or occupation requiring state licensure where the licensing agency has a regulation permitting a different standard.
(2) In some cases, Stanton University may still transfer the course but not award the full credit toward graduation. For example, a 3-unit quarter course can satisfy a 4-unit quarter course requirement; however, it will still transfer as 3 units. Therefore, you may be short a few credits in overall requirements for graduation and may still need to take additional courses.

STUDENT INFORMATION		
Last Name	**First Name**	**Middle Name** (if any)
Student ID	**Program of Study**	

Previous School	**Major/Program at Previous School**

COURSES TO TRANSFER				**MATCHING SU COURSES**			**Approved?**	
Code	**Course Title**	**Units**	**Grade**	**Code**	**Course Title**	**Units**	**Yes**	**No**

X
Student Signature **Date Signed** (mm/dd/yyyy)

X
Director of Academic Affairs Signature **Date Signed** (mm/dd/yyyy)