



Virginia International University
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Transfer-In Student Agreement Form

STUDENT INFORMATION

Student Application #: _____

Last Name: _____ First & Middle Name: _____

Address:

Street

City

State

Zip

Home Phone No.: (____) _____ - _____ Cell Phone No.: (____) _____ - _____

E-mail: _____ SSN: _____

PROGRAM INFORMATION

Mark your intended program(s) of study:

- MBA MCS MIS MA in TESOL TESOL Cert
 Pre MBA Pre MCS Pre MIS BBA BCS
 Int'l Buss Cert Medical Admin Cert SBM Cert IT Specialist Cert
 ESL Combination

Program Semester Start Date: _____

Select one:

I am a: Full-Time Part-Time student.

NOTICE TO STUDENT

1. Do not sign this agreement before you have read it in its entirety or if it contains any blank spaces.
2. This agreement is binding only when both sides are signed, and dated by the VIU authorized official or the admissions officer at VIU's principal place of business in Fairfax, Virginia. Read both sides before signing.
3. You are entitled to an exact copy of this agreement and any disclosure pages you sign.
4. This agreement and the academic catalog constitute the entire agreement between the student and VIU.
5. VIU reserves the right to cancel and/or reschedule the program start date.
6. VIU does not guarantee the transferability of credits to any college, university, or institution. Any decision on the comparability, appropriateness, and applicability of credits and whether they should be accepted is solely the decision of the accepting school.

_____ **Student initials**

STUDENT ACKNOWLEDGEMENTS

1. If you plan to transfer credit that you have earned from your previous school(s), the following transfer policy will apply:
 - (a) Courses to be transferred must be similar to VIU courses.
 - (b) Each course should be a credit course.
 - (c) The course grade must be a B or higher for graduate programs or a grade of C or higher for undergraduate programs.
 - (d) The student must submit course descriptions or syllabi if requested.
 - (e) The maximum number of transferable credits is 18 for graduate programs and 60 for undergraduate programs.

Further, I acknowledge that VIU will not accept credits from non-accredited institutions or institutions that have accreditations which are not recognized by the U.S. Department of Education and/or the Council for Higher Education Accreditation (CHEA) or equivalent entity in the country where the institution is located.

_____ **Student initials**

2. I understand that course attendance at VIU is mandatory, and that unexcused absences for any reason may negatively affect the student’s final course grade. Under faculty discretion, unexcused absences in excess of 25% of total class and lab time may result in failure of the course.

_____ **Student initials**

3. I understand that in order for me to apply for Curricular Practical Training (CPT) I must be enrolled in an academic program at least for one academic year. Classes taken during the summer are not considered as part of the academic year. I further acknowledge that I must receive approval from the academic school dean as well as the International Student Advisor prior to my CPT request approval.

_____ **Student initials**

AGREEMENT ACCEPTANCE

I, the undersigned, have read and understand this agreement. It is further understood and agreed that this agreement supersedes all prior or contemporaneous verbal or written agreements. The agreement may not be modified without the written agreement of the student and the VIU official.

My signature below signifies that I have read and understand all aspects of this agreement and recognize my responsibilities in regard to this agreement.

Signature of Student Date

Signature of VIU Official Date