

Transfer Credit Evaluation Request Form

Purpose of this form: This form is to be used when a student wishes to request that credit hours from previous colleges/universities be evaluated for possible transfer credit, to be used toward their degree requirements at VIU.

Transfer credit policy: Students who want to apply courses taken at another Institution toward their VIU degree must understand that the following criteria must be met in order to be considered for transfer of credit. (a) The courses are equivalent to VIU courses within the student's program of study, (b) each course should be at least 3 credits, (c) no duplicate courses, (d) and any student looking to obtain transfer credit from an institution located outside of the United States will need to obtain a *detailed course-by-course evaluation* from a member of the Association of International Credentials Evaluators (AICE) – www.aice-eval.org, the American Association of Collegiate Registrars and Admissions Officers (AACRAO) – www.aacrao.org, or the National Association of Credential Evaluation Services (NACES) – www.naces.org.

Graduate Students: (1) grade must be B or higher, (2) maximum number of transferable credits are 15 credits for Master's degree program and 6 credits for Graduate Certificate program. **Undergraduate students:** (1) grade must be C or higher, (2) maximum number of transferable credits are 60 credits for Bachelor's degree program and 12 credits for Diploma program.

Dual Enrollment Policy: During the time of study at VIU while being enrolled at another institution is considered to be Dual Enrollment. A student may transfer no more than two courses (up to 6 credit hours) from another institution; provided that the total number of transfer credits does not exceed the 50% threshold and the institutions accreditation (or its equivalency) is verifiable with the exception of a Bachelor's degree program, which allows up to four courses (12 credit hours) to be transferred. The transfer credits are counted as part of the maximum transfer credits, and a prior written approval of the School Dean/Director is required.

Directions: Please list the courses, as they are listed on your official transcript to be evaluated for credit transfer from your previous Institution. The course content, objectives and outcomes considered for transfer must match the course content of the course intended for transfer. For purposes of the evaluation, the student shall supply credible documentation suitable for determining course objectives and outcomes. **A course syllabus that includes course objectives and course descriptions, or a copy of a catalog (electronic or physical copy) from the relevant institution detailing program offerings and course objectives, are acceptable forms of documentation.**

- 1.) Fill out this form completely
- 2.) Submit scanned color copies of the original documents to Registrar's Office at registrar@viu.edu or in person at the Registrar's Office
- *(Documents must be completed in full to be considered)*
- 3.) Students will be notified of the results by email within 30 days of submission of their completed documents

VIU ID or Application #:	Last Name:	First, Middle (if any) Name:
Program of Study:	Concentration/Specialization (if applicable):	Email:

Name of Institution:	Program of Study:	Institution credits are listed as: () Semester Hours () Quarter Hours or Other
----------------------	-------------------	---

Student completes				Office Use Only					
Course Code	Course Name Requesting Transfer Credit	Credits	Grade	VIU Course Code Requesting Equivalency	Credits	US Grade Equivalency	Approved	Evaluator(s)	Comment, if any
1.							Yes / No		
2.							Yes / No		
3.							Yes / No		
4.							Yes / No		
5.							Yes / No		
6.							Yes / No		
7.							Yes / No		
8.							Yes / No		
9.							Yes / No		
10.							Yes / No		

By signing below, I certify that I read the transfer credit policy in the academic catalog and the information contained on this form, and all supporting documentation, is true and accurate.

Student Signature: _____ Date: _____

Dean Signature: _____ Date: _____ Approved TC: _____ Credits / Denied TC: _____ Credits

VP of Academic Affairs: _____ Date: _____

Date Received _____
Date Processed _____
Registrar Signature _____