Randolph-Macon College

Office of the Registrar PO Box 5005, Ashland, VA 23005 registrar@rmc.edu

TRANSFER CREDIT PERMISSION FORM

INSTRUCTIONS:

Bring or email the completed form to the Registrar's Office for final approval. Please allow 2 days before picking up your approved form from the Registrar's Office. We can also email a signed copy to you if you wish.

PLEASE NOTE: It is the student's responsibility to request that an official transcript be sent to the Randolph-Macon Registrar's Office upon completion of this course work to be awarded transfer credit. Grades for transfer courses must be a minimum of C- for the course and hours to be accepted by RMC. Transfer course grades are NOT calculated in the RMC GPA but ARE calculated in the major/minor GPA for graduation. Transfer courses may not be taken on a pass/fail basis.

At 1: -4-		0
Student:		Summer of:
ID:	Advisor:	Fall of:
Phone #:	Major(s):	Spring of:
	Minor(s):	
(*Final credits toward degree RMC Spring term final exam	s to be considered for Spring Commer permission to take work for transfer credit	with the Registrar's Office by the last day of encement.)
Institution.	and	d leceive cledit for the following codises if appro
Dept. & #	Couse Title	# Hrs. Repeat R-MC Equ
		
This approval is for a maxim	um of semester hours of cre	radit
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I certify that I have read th progress:	e above notice and understand its i	implications regarding my academic
Signature of Student:		Date
Final Approval:		
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Date:		