



# TRANSFER CREDIT REQUEST FORM

School of Professional Development (SPD)  
N 201 SBS Building • Stony Brook University  
Stony Brook, NY 11794-4310

RETURN ALL PARTS OF COMPLETED FORM TO TRANSFER CREDIT ADVISOR, SPD OFFICE (ADDRESS ABOVE);  
REVIEW SPD'S TRANSFER CREDIT POLICIES BEFORE COMPLETING FORM.

Name \_\_\_\_\_ Date of Request \_\_\_\_\_  
Last First Maiden or Middle SPD Degree or Certificate \_\_\_\_\_  
Address \_\_\_\_\_ Street \_\_\_\_\_ Stony Brook ID Number \_\_\_\_\_  
Telephone \_\_\_\_\_ Date Entered SPD Program \_\_\_\_\_  
City State Zip E-mail \_\_\_\_\_

A) Course No. and title \_\_\_\_\_ # of Credits \_\_\_\_\_ Semester \_\_\_\_\_ Quarter \_\_\_\_\_  
Taken at \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
(institution, city, state) (month/yr.) (month/yr.)  
Grade \_\_\_\_\_ Transcript (has been  will be ) sent to SPD. Remarks(s) \_\_\_\_\_

ATTACH OFFICIAL DESCRIPTION; You must also submit additional information (syllabus, texts, etc.) as specified on the cover sheet.

B) Course No. and title \_\_\_\_\_ # of Credits \_\_\_\_\_ Semester \_\_\_\_\_ Quarter \_\_\_\_\_  
Taken at \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
(institution, city, state) (month/yr.) (month/yr.)  
Grade \_\_\_\_\_ Transcript (has been  will be ) sent to SPD. Remarks(s) \_\_\_\_\_

ATTACH OFFICIAL DESCRIPTION; You must also submit additional information (syllabus, text, etc.) as specified on the cover sheet.

**PLEASE DO NOT WRITE BELOW THIS LINE**

## SPD EVALUATION TO STUDENT APPROVALS

A)  Prior approval to take course granted \_\_\_\_\_ (Date)  
for \_\_\_\_\_ semester. \_\_\_\_\_  
Transfer Credit Advisor, SPD  
Credits will be applied to \_\_\_\_\_ degree/certificate requirements  
as follows:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
As a result of this transfer, Stony Brook's course \_\_\_\_\_  
\_\_\_\_\_ may  
not be taken for credit toward the \_\_\_\_\_ degree/certificate  
 Transfer of credits, **APPROVED**.  
Date of Final Evaluation \_\_\_\_\_ by \_\_\_\_\_  
(Transfer Credit Advisor, SPD)

B)  Prior approval to take course granted \_\_\_\_\_ (Date)  
for \_\_\_\_\_ semester. \_\_\_\_\_  
Transfer Credit Advisor, SPD  
Credits will be applied to \_\_\_\_\_ degree/certificate requirements  
as follows:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
As a result of this transfer, Stony Brook's course \_\_\_\_\_  
\_\_\_\_\_ may  
not be taken for credit toward the \_\_\_\_\_ degree/certificate  
 Transfer of credits, **APPROVED**.  
Date of Final Evaluation \_\_\_\_\_ by \_\_\_\_\_  
(Transfer Credit Advisor, SPD)

## PROBLEMS

## REASON TRANSFER CREDIT REQUEST DENIED:

### SPD Evaluation:

Transfer Credit Request ~~Approved~~ Denied \_\_\_\_\_  
(Transfer Credit Advisor, SPD)

\_\_\_\_\_ Date

Please transfer course(s) \_\_\_\_\_ and \_\_\_\_\_  
completed from \_\_\_\_\_ to \_\_\_\_\_  
at \_\_\_\_\_

Total credits transferred \_\_\_\_\_