



Office of the Registrar
 100 Institute Road, Worcester, MA 01609
 Ph: (508)-831-5211
 Fax: (508)-831-5931

Undergraduate Transfer Credit Authorization Form

Instructions:

Please complete the following information requested below and return the form to the Office of the Registrar in Daniels Hall.

Important Information:

After successful completion of the course, request an official transcript of your grade to be sent to Office of the Registrar, 100 Institute Road, Worcester, MA 01609. Credit will appear on the Web Information System once it has been posted.

Part I: Please Print

Name: _____ Student ID: _____

Email: _____ Year: _____ Major: _____

Part II: Please Print

Transfer Course Information

The abovementioned student has our approval to take the following course at a regionally accredited post-secondary institution. (Excludes non-credit, continuing education, and adult enrichment courses – for further information please refer to the Undergrad Catalog)

Course # _____ Title _____

Credits _____ Name of College _____

I intend to take this course: Summer 20 ____ Fall 20 ____ Spring 20 ____

*I plan to take this course on-line: ____ Yes ____ No

Department Head Approval to take this course on-line: _____

**Some departments do NOT accept on-line courses. Please confirm with the relevant department before taking any on-line course.*

I plan to take this course as an Intersession course: ____ Yes ____ No

Department Head Approval to take this Intersession Course: _____

Part III:

WPI Course Equivalent and Approval

(To be completed by the Department Head)

Course # _____ Title _____

Minimum Grade for Obtaining Credit _____ Units** _____ Grade earned _____
 (after receipt of transcript)

****Generally 3 credit hours = 1/3 unit**

Department Head Signature _____

Date _____