## **College of Undergraduate Studies** Transfer Credit Preapproval

Date:	Term/Year for	Student ID:			
Student Name:	Student ID:				
Program:	Major:				
E-mail:	Phone:	Phone:			
Current Address (Street, City,	State, Zip):				
to apply toward your CU accredited institution outside of	JS degree. This should be done prior CCU's College of Undergraduate S ication of transfer credits prior to comparation.	or to registrati tudies, to ensu	on at an	ering	
CCU:  A minimum of 30 semester  Within a major  At least 50% of the cou  At least 12 upper divisity  Within a minor  At least 50% of the cou  A maximum of 30 credits n	rsity undergraduate degree, the following seme credits.  urse requirements in the major field. ion (300 or 400 level) semester hours.  urse requirements in the minor field. nay be transferred in toward an Associate of A would like to transfer credits (include	Arts degree.		through	
► Term/Year to be taken:	List course(s) to	o be taken:		<del></del>	
Non – CUS course:	Apply to CUS requirement		Decision by School Dean for Major, Minor and Gen-Ed Please initial Approve Deny Substitutio		
All signatures must include legibly printed name.  Student Signature:			Date:		
Student Advisor:			Date:		
Dean:			Date:		
Registrar:			Date:		

Revised: 06/2018