

Advisor

Date

Transfer Credit Pre-Approval Form

Registrar's Office | 141 Todd Wehr Hall | 920-403-3949

Approved by:_____

Student: Name:		SNC ID:	
Date:		_	
Transfer Institution:			
School where course is	to be taken:		
Course number and title	::		
Term Course is to be tal	ken:		
Credit Requested:			
SNC Course Equivalent	:		
Repeat course? Yes/ N	10		
Have you taken previou	s transfer work? Yes/ No		
on a Satisfactory transcripted. 2. A maximum of SNC. 3. Core Advanced of All major, minor, courses (32 sems). 5. Upon completion	eceive a grade of "C" (2.0/4 //Unsatisfactory or Pass/Fa 12 semester credits from courses (C-AD) cannot be and degree residency req . crs.) and at least one qual	4.0 scale) or better to receive transferable all basis are not transferable. Specifically a scourses may be transferred after transferred from two-year colleges. Juirements are in effect. Students mularter of their major and 2 courses in all transcript must be sent directly to De Pere, WI 54115. Discipline Coordinator	ic transfer grades are not ter initial enrollment at ust complete their last 8 their minor at SNC.
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		Received by Registrar:	