CAPILANO UNIVERSITY

REQUEST FOR TRANSFER CREDIT

Registrar's Office, North Vancouver Campus
Email: transfercredit@capilanou.ca

PLEASE READ CAREFULLY

To submit a request:
- Complete Parts 1 and 2 of the form
    - Attach/include all course outlines. Please ensure all sections of the form, including personal information are completed prior to submitting.
- Submit completed form to transfercredit@capilanou.ca

Please note:
- Approved requests are relevant at Capilano University only. Other institutions to which you may transfer have the option to evaluate your credits differently.
- Should your transfer credit be approved, you will **not** be automatically deregistered or withdrawn from any courses at Capilano University. It is the student's responsibility to ensure that course registration is kept up to date.
- All requests must be supported by a detailed course outline.

PERSONAL INFORMATION – PART 1 Complete all information in this section		
STUDENT NUMBER	LEGAL LAST NAME	LEGAL FIRST NAME
PROGRAM OF STUDY	SIGNATURE	DATE (MM/DD/YYYY)

TRANSFER INSTITUTION and COURSE INFORMATION – PART 2					
INSTITUTION NAME		☐ TRANSCRIPT ATTACHED ☐ TRANSCRIPT PREVIOUSLY SUBMITTED			
COURSE COMPLETED	COURSE TITLE	CREDIT HOURS	YEAR TAKEN	GRADE	EQUIVALENT CAPILANO SUBJECT AREA

REGISTRAR'S OFFICE USE ONLY	
ENTERED BY:	DATE (MM/DD/YYYY)