



# Request for Transfer Credit Form

Office of Graduate Studies  
University of Ontario Institute of Technology  
2000 Simcoe Street North  
Oshawa, ON L1H 7K4  
T 905.721.8668  
F 905.721.3062  
[www.gradstudies.uoit.ca](http://www.gradstudies.uoit.ca)

With the approval of the faculty and the Office of Graduate Studies, transfer credit may be granted for graduate work completed in another program, and has not been credited towards another degree, diploma, certificate or any other qualification. Please note that 50% of the course work must be completed at UOIT.

Student Name (first name, last name)

UOIT Student Number

\_\_\_\_\_

\_\_\_\_\_

Program Name \_\_\_\_\_

Course No.	Title	Weight		Institution Where Taken	Session	Grade
		Half	Full			

I request transfer credit for the above course(s) toward my \_\_\_\_\_ degree program at the University of Ontario Institute of Technology.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

*The information requested on this form is collected under the authority of the University of Ontario Institute of Technology Act, 2002. The information on this form is collected for the purpose of administering admissions and registration. Inquires concerning the collection of this information should be directed to the Graduate Admissions and Registration Officer, UOIT, 905.721.8668.*

If you require this information in an alternate format due to disability, please email [gradstudies@uoit.ca](mailto:gradstudies@uoit.ca)

### OFFICE USE ONLY

\_\_\_\_ Approved

\_\_\_\_ Approved

\_\_\_\_ Refused

\_\_\_\_ Refused

\_\_\_\_\_  
Graduate Program Director

\_\_\_\_\_  
Signature - Dean of Graduate Studies

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date