# INDIANA**TECH**

# Pre-Approval for Transfer Credit

## *Student Information*

Name: _____

Student ID or Social Security #: _____   IndianaTech.net email: _____

Degree:  ☐ Associate of Science  ☐ Bachelor of Arts  ☐ Bachelor of Science  ☐ MBA  ☐ MSM  ☐ MSE  ☐ MSOL

Major: _____

Cumulative GPA: _____   Credits completed: _____

Student Type: ☐ Traditional (daytime classes at Fort Wayne campus)   ☐ College of Professional Studies (evening/weekend/online)

## *Transfer Credit Information*

I request approval of transfer credit to curriculum at Indiana Tech from:

College or university: _____

Course code and title (please attach a course description): _____

Credits: _____   Semester in which course will be taken: ☐ Fall   ☐ Spring   ☐ Summer   Year: _____

Equivalent Indiana Tech course: _____

**Transfer credit will not be applied to the last 21 credits of a student's degree.**

**Grade earned must be a C or higher for undergraduate transfer credit to be accepted, a B or higher for graduate credit to be accepted.**

Student signature: _____   Date: _____

Director of International Student Admissions signature: _____   Date: _____
(applies only for international students)

**Please print, sign and return this form to:**

Registrar's Office
Indiana Tech | 1600 E. Washington Blvd. | Fort Wayne, IN 46803
Fax: 260.422.6309 | Email: Registrar@IndianaTech.edu

---

**For Office Use Only**   ☐ Approved   ☐ Denied

Comments: _____

_____

_____

Signature: _____   Date: _____