

ADV NOTE WRITTEN

TRANSFER CREDIT EVALUATION For Graduate Credit Transfer or Undergraduate Transfer from International Schools

Department completes form and submits to Dean's Office for approval. Then send to Transfer Team via transferteam@udmercy.edu (with official transcripts if not in Slate)

9/18/2020

Student Name:			T0			
Detroit Mercy College/School:						
Transfer Credits to but Institution 1:	oe added toward: Under	graduate p		gram ernational Institution:		
Institution 2:			Int	International Institution:		
The following course	es are acceptable toward the Detro	oit Mercy d	egree program listed above.			
Institution Name	Course info from Transcript (ex. ECON 5100)	Credits	Detroit Mercy Equiv Course (or Dept if no direct equivalent ex. ECN 5)*	Detroit Mercy Course Title (if applicable)	Credit	
Attach a Substitution	form if needed.			TOTAL # TRANSFER CR:		
Dean's Office Signature:			Date:			
FOR OFFICE OF R	EGISTRAR USE ONLY:					
Processed by Transfer Team Signature:			Date:			

NOTIFIED SENDER