

STUDENT SERVICES

Request for Transfer Credit Form

Submit to your Student Advisor, c/o Extended Education, 185 Extended Education Complex, University of Manitoba, Winnipeg, MB R3T 2N2.
Please contact the Student Advisor to verify documentation required before submitting this form.

THIS SECTION TO BE COMPLETED BY THE STUDENT

Last Name: _____ First (Given) Name: _____
 Student Number: _____ Date of Birth (yy/mm/dd): _____

Credit requested to University of Manitoba based on:

1

From institution:				For U of M program:	
Course Title:				Course Title:	
Course Number:	Grade:	Hours:		Course Number:	Hours:

2

From institution:				For U of M program:	
Course Title:				Course Title:	
Course Number:	Grade:	Hours:		Course Number:	Hours:

3

From institution:				For U of M program:	
Course Title:				Course Title:	
Course Number:	Grade:	Hours:		Course Number:	Hours:

4

From institution:				For U of M program:	
Course Title:				Course Title:	
Course Number:	Grade:	Hours:		Course Number:	Hours:

5

From institution:				For U of M program:	
Course Title:				Course Title:	
Course Number:	Grade:	Hours:		Course Number:	Hours:

Please ensure you have met the following requirements as laid out on the website. Also include all required documentation with your request:
I authorize access to my University of Manitoba transcript

Signature: _____ Date: _____

Your personal information is being collected under the authority of *The University of Manitoba Act*. The information you provide will be used by the University for the purpose of assessing the applicant's eligibility for a course credit in a certificate program. Your personal information will not be used or disclosed for other purposes, unless permitted by *The Freedom of Information and Protection of Privacy Act* (FIPPA). If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.

METHOD OF PAYMENT:

For CIM transfers, challenge, seminar study or prior learning. Please indicate type of payment. All applicable fees must accompany this form.

Debit – In-person only. Cheque/Money Order – Payable to the University of Manitoba (post-dated cheques can not be accepted).
 Payment by credit card – Complete the following section. Visa MasterCard

Credit card number: _____ CVC (Card Verification Code): _____ Expiry date: _____

Card holder's name (as it appears on the card): _____ Amount: \$ _____

Authorizing signature: _____

STUDENT SERVICES

Request for Transfer Credit Form (Administration)

THIS SECTION TO BE COMPLETED BY THE STUDENT ADVISOR

Course credit request has been: Approved Denied Is on Grid

Comments:

The following must be completed if submitting to the Course Credit Committee. Please attach ALL applicable documents as listed below:

Completed Course Content Evaluation Form (Instructor recommendation)

Course	Seminar	Type of transfer
Official transcript (no photocopies)	Proof of attendance	Transfer (on the grid)
Course or program completed within the last ten years	Learning agenda	Transfer (not on the grid)
Grade of C or better	Number of contact hours	Transfer (expired from the grid)
Course outline	Completed within the last ten years	Standing agreement
	Seminar assignment graded	Substitute course
		Challenge for credit
Have original transcripts been provided? Yes No		Seminar Study
Do grades meet program requirements? Yes No		Prior Learning Assessment and Recognition (PLAR)

Signature: _____ Date: _____

THIS SECTION TO BE COMPLETED BY THE COURSE CREDIT COMMITTEE

1. Approved - add to the grid for years (standard is 5 years) Denied Pending Initial: _____

If credit is denied or pending, explain:

2. Approved - add to the grid for years (standard is 5 years) Denied Pending Initial: _____

If credit is denied or pending, explain:

3. Approved - add to the grid for years (standard is 5 years) Denied Pending Initial: _____

If credit is denied or pending, explain:

4. Approved - add to the grid for years (standard is 5 years) Denied Pending Initial: _____

If credit is denied or pending, explain:

5. Approved - add to the grid for years (standard is 5 years) Denied Pending Initial: _____

If credit is denied or pending, explain:

Signature: _____ Date: _____

THIS SECTION TO BE COMPLETED BY THE COURSE CREDIT COMMITTEE

Comments:

Signature: _____ Date: _____

OFFICE USE