

## 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

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 my degree curriculum at Indiana Tech from:

Name of 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: \_\_\_\_\_

Student Advisor signature: \_\_\_\_\_ Date: \_\_\_\_\_

**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

**Registrar Office Use Only**  Approved  Denied

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Registrar signature: \_\_\_\_\_ Date: \_\_\_\_\_