

Application for Course Credit Transfer

Master of Education/Master of Counselling

University of Lethbridge ID Number									
Today's Date (DD/MMM/YYYY)									

This form is to be completed to request credit for previous work. Submit the completed form to Graduate Studies and Research in Education (Turcotte Hall). Review the Policies & Procedures (<http://www.ulethbridge.ca/graduate-studies/policies-procedures>) and the University of Lethbridge Graduate Studies Calendar and Course Catalogue (<https://www.uleth.ca/ross/academic-calendar>).

Student information

Last Name: _____ First Name: _____

☐ Master of Education: ☐ Counselling Psychology ☐ Educational Leadership ☐ General (e.g., Literacy): _____

☐ Master of Counselling

Course Information

Transfer course number and title: _____

Institution: _____ Instructor: _____

Date completed/anticipated date of completion: _____ Course delivery mode (lecture, seminar, online): _____

Grade achieved: _____ Course level: _____ Credit hours: _____ Prerequisites: _____

State how this course relates to your program:

Attachments

The following must be provided:

- ☐ Course description: Instructor's outline including instructor's name, course overview, objectives, content outline and primary resources.
- ☐ Calendar information: Description, credit hours, etc.

- Refer to the University of Lethbridge Graduate Studies Calendar and Course Catalogue for policies related to requesting credit for previous work, including, but not limited to content located in the following sections of the Calendar:
 - **Admission:** Transfer Credit
 - **Academic Regulations, Policies, and Program Requirements:** Residence Requirements and Time Limits
 - **Relevant Degree Section:** Requirements for the Degree, Residence Requirements, Credit for Previous Work, Academic Standards
- Each request for course credit transfer will be considered individually based upon how the course(s) relates to the student's program.
- Students who have already been admitted to a program may find it desirable or necessary to complete courses at other institutions. Such courses must be approved for transfer credit prior to registration, which is completed through either Visiting Student or Western Deans' Agreement procedures.
- It is the student's responsibility to arrange for an academic transcript indicating course completed to be sent directly by the issuing institution to the Office of Graduate Studies and Research in Education, Faculty of Education, University of Lethbridge.

Approval

Name: _____ Signature: _____ Date: _____
Associate Dean, Graduate Studies and Research in Education

Office use only

☐ Registrars' Office notified ☐ Student notified

Course approved as: _____ Western Dean's ☐ Yes ☐ No