



Study Abroad Transfer Credit Request

This form must be completed prior to beginning study-abroad semester to be assured that academic credit will be awarded by York College. Students must work with their Academic Advisor prior to submitting this form and supporting course documentation to the Study Abroad Coordinator.

Name: _____ **ID #:** _____

Study Abroad Institution: _____

Address of Institution: _____

Institutional Contact: _____

Semester of Attendance: _____ **Year:** _____

*It is necessary for the student to provide the Academic Advisor and Registrar with course descriptions and syllabi in order to determine appropriate York College course equivalencies.
Course descriptions are typically found in college catalogs.*

Courses You Wish to Take				<i>(This section is completed by Advisor or Registrar only)</i> York College Course Equivalent				
Subj. Code	Course No.	Title	Credits	Subj. Code	Course No.	Title	Credits	Gen. Ed.
<i>Example: PSY</i>	<i>138</i>	<i>Intro to Psych</i>	<i>3</i>	<i>Example: PSY</i>	<i>100</i>	<i>Intro to Psych</i>	<i>3</i>	<i>See code</i>

Specific GenNext area met: F = Foundations, DP = Disciplinary Perspectives, HIPI

Please note the following York College policies that also apply to courses taken abroad:

- *PERMISSION IS NOT GRANTED FOR REPEATED YORK COLLEGE COURSES TAKEN OFF-CAMPUS.*
- *Credits earned with a “2.0 on a 4.0 scale” or better may be transferred back to York College. Grades earned in courses at other institutions do not transfer to York College.*
- *It is the responsibility of the student to have the college or university named on this form send an official transcript of the work completed to the Registrar’s Office, York College of Pennsylvania, York, PA 17403.*

By signing below, I have read and understand the instructions and policies listed on this form, those included in the catalog, and will adhere to the polices as stated in the York College of Pennsylvania course catalog.

Student Signature: _____ **Date:** _____

I have confirmed that this student is in good academic standing at York College of Pennsylvania and after successful completion has permission to transfer the courses listed above to York College.

Academic Advisor (or Graduate Coordinator):

Print Name _____ *Date*

Signature

Study Abroad Coordinator:

Print Name _____ *Date*

Signature

Director of General Education:

(Only required if student is seeking General Education distinction for a course)

Print Name _____ *Date*

Signature

Registrar:

Print Name _____ *Date*

Signature