



HORACE H. RACKHAM SCHOOL OF GRADUATE STUDIES
University of Michigan

STUDENT SERVICES: ACADEMIC RECORDS & DISSERTATIONS

915 E. Washington Street • 0120 Rackham Building • Ann Arbor, MI 48109-1070

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REQUEST FOR TRANSFER OF CREDIT TO A MASTER'S DEGREE PROGRAM

A student must complete at least eight (8) hours of graded graduate level coursework in Rackham, and have at least a 5.0 cumulative grade point average, before requesting a transfer of credit. PLEASE NOTE: Once this form has been completed and signed by the student, a current final official transcript from the institution must be attached to this form and submitted to the department for approval and signature.

Student Name: _____ Master's Program: _____

Student UM ID: _____ E-mail: _____

- A maximum of six* *semester* hours of approved graduate level courses may be requested for transfer out of an accredited institution authorized to grant master's degrees where a grade of "B" or better was earned for each course. Credit will be transferred only upon: (1) completion of this form; (2) receipt of a current official transcript from the institution out of which the credit will be transferred; and (3) approval of the Rackham program graduate chair.
- Courses will *not* be transferred if: (a) the student's overall cumulative in-residence GPA is less than a "B" (5.0); (b) the course was taken more than five years before beginning the current Rackham master's program; (c) a grade below a "B" was earned; or (d) credit(s) were used, in whole or in part, to fulfill requirements for a bachelor's or other degree or certificate; or (e) will be used, in whole or in part, to fulfill requirements for any degree in the future; or (f) extension, continuing education, or online learning.
- Transferred courses will not carry the grade or honor points to the Rackham record. Thus, it will not affect the student's cumulative GPA.

*For more information, please see the student handbook: <http://www.rackham.umich.edu/policies/gsh>

Courses and credit hours requested to be placed on my Graduate School academic record:

Course Code or Number	Course Title	Hours	Institution
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____

Student Signature

Student Name Printed

Date (MM/DD/YYYY)

Graduate Chair (or Designate) Signature *

Graduate Chair (or Designate) Name Printed

Date (MM/DD/YYYY)

***Graduate Chair (or designate) signature denotes departmental approval. Final approval is contingent upon review and acceptance by Rackham Graduate School.**

For Rackham OARD use only:

Program 8 Hours GPA Bachelor's Time Accredited Grade Not Used for Degree