



Graduate School of Humanities and Social Sciences

Department of Multidisciplinary Studies

APPLICATION FOR TRANSFER OF CREDIT

Instructions:

If you have completed graduate level coursework within the past **seven (7) years**, and earned a B or higher, you may be eligible for transfer of credit. To apply for transfer of credit, please follow these steps:

1) Enclose a copy of **each course syllabus** for which you are applying for transfer of credit, **as well as the official description from the college or university catalog, and official transcript if not already on file.**

2) Submit the attached **Application for Transfer of Credit:**

3) **Submit all documents by fax or mail to:**

Nova Southeastern University

Attention: Tamea Graham

Department of Multidisciplinary Studies (DMS)

SHSS

3301 College Avenue

Ft. Lauderdale, FL 33314

Fax: (954) 262-2462

Phone: (954) 262-3007



Graduate School of Humanities and Social Sciences
Department of Multidisciplinary Studies
APPLICATION FOR TRANSFER OF CREDIT

Student Name: _____

NSU ID Number: N_____

Nova Email Address: _____@nova.edu.

Student Signature: _____ **Date:** / /

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Telephone: _____ - _____ - _____

Date Submitted: ____ - ____ - ____ **Approval Date:** ____ - ____ - ____

Total Credits Approved: _____

Approved By: _____

Signature: _____



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Student's Name: _____

NSU ID Number: N_____

Please note that Transfer of Credit is not guaranteed.

Course Taken Previously	DMS Course Equivalent	Accept	Denied
Course #: _____ Course Name: _____ _____ College/University: _____ _____ Grade: _____ Number of Credits: _____ Semester taken: _____ Checklist: Graduate level course <input type="checkbox"/> Taken within the last 7 years <input type="checkbox"/> Official course description from catalog included <input type="checkbox"/> Syllabus included <input type="checkbox"/> Transcript included <input type="checkbox"/>	Course #: _____ Course Name: _____ _____ _____	<input type="checkbox"/>	<input type="checkbox"/>

Approved By: _____

Student's Name: _____

NSU ID Number: N_____

Please note that Transfer of Credit is not guaranteed.

Course Taken Previously	DMS Course Equivalent	Accept	Denied
Course #: _____ Course Name: _____ _____ College/University: _____ _____ Grade: _____ Number of Credits: _____ Semester taken: _____ Checklist: Graduate level course <input type="checkbox"/> Taken within the last 7 years <input type="checkbox"/> Official course description from catalog included <input type="checkbox"/> Syllabus included <input type="checkbox"/> Transcript included <input type="checkbox"/>	Course #: _____ Course Name: _____ _____ _____	<input type="checkbox"/>	<input type="checkbox"/>

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Approved By: _____

Student's Name: _____

NSU ID Number: N_____

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Approved By: _____