## The College of New Jersey Office of Records & Registration

Office of Records & Registration P.O. Box 7718, Ewing, NJ 08628-0718 609-771-2141

## GRADUATE COURSE AUTHORIZATION FORM

NAME:						
				PAWS ID #:		
Last	First	M.	l.			
PHONE: TCNJ EMAIL:				MAJOR:		
Address:						
Street: City:					State: Zip:	
NOTE: A course may not be repeated for credit.						
CIRCLE ONE: SUMMER FALL WINTER SPRING YEAR						
SECTION 1. MUST BE COMPLETED BY THE STUDENT.						
AUTHORIZATION FOR COURSE TRANSFER FROM(Name of Institution(s)						
(Name of institution(s)						
DEGREE CODE YEAR OF ENTRY AT TCNJ						
CUM. GPA		NUMBER (	CREDITS TR	ANSFERRED	TO TCNJ TO DATE*	
Course Authorized from Sending Institution TCNJ Equivalent Course that is being Substituted						
Course #	Course Title	Institution	Credits	Cours	1	
Course II	Course Title	monutation	Civano	Cours	Course Title	
I verify that th	  e_above_information_i	s correct and complet	e·			
I verify that the above information is correct and complete:						
(Signature) (Address) (Telephone)						
* Students may apply at matriculation for transfer of graduate credits applicable to their programs. A maximum of twelve (12) graduate credits may be transferred. All transfer work must be approved both by the institution within thelast six years with a						
grade of B or higher to be eligible for approval. They cannot duplicate any graduate or undergraduate work for which credit has						
been given at The College of New Jersey and cannot apply for another academic degree at any other institution.						
Matriculated students must obtain written approval from their graduate coordinators before enrolling in graduate courses that are to be transferred for credit to this college. <b>It is the student's responsibility to have Official transcripts sent directly</b>						
from the Institution to the Office of Records & Registration. At the Graduate Coordinator's discretion, the student may also be						
required to provide them with a copy of the transcript(s) and a description of the course(s) being transferred.						
SECTION 2.						
FOR GRADUATE COORDINATOR'S ONLY:						
Official Transcript(s) reviewed:No						
Course Description(s) reviewed:YesNo						
Recommendation for:ApprovalNon-Approval						
Graduate Coordinator's Signature:					Date:	
FOR RECORDS AND REGISTRATION ONLY:						
Course transfe	Course transfer approved Course transfer not approved					
Records & Registration/Graduate Evaluation:						

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