UNIVERSITY of NORTH CAROLINA PEMBROKE

Request to Take Course as a Visitor at another University

Mail: UNC at Pembroke   **Email:** Registrar@uncp.edu
Office of the Registrar   OR: **Fax:** 910-521-6328
P.O. Box 1510
Pembroke, NC, 28372

UNCP ID	8	4	0						

TRANSFER REQUEST POLICY

In order to take a course as a visitor at another University, the student:

- Must have written approval from UNCP advisor or Department Chair if the course is part of their major curriculum.
- Must have written approval from the UNCP Registrar.
- **Must have a minimum QPA of 2.0, and be in Good Standing.**
- Must have an official transcript submitted to the UNCP Registrar immediately upon completion of the course.
- Courses accepted for transfer credit will be evaluated in terms of UNCP's academic policies, curriculum and the student's proposed program at UNCP. Fractional credit will not be granted for partial completion of any course.
- **Credit hours will transfer for courses in which the student earns a "C" or better.** Grades earned at other institutions are **not** used to compute UNCP's quality point average.

Permission will not be granted to repeat a course at another institution. Students may elect to repeat any course if the original course and the repeat course are taken at UNCP.

INSTRUCTIONS

1. IF YOU REQUEST COURSES IN YOUR MAJOR you will need your faculty advisor/Dept. Chair's signature on this form.
2. FILL OUT THE FORM COMPLETELY and return it with CATALOG DESCRIPTIONS to the Registrar's Office.
3. **Credit must be approved before registering for course(s) at visited institution.**

Student Information

Last Name	First Name	Middle Initials	Suffix (Jr., II., etc.)

Date of Birth	Home or Cell #	Email	
			@bravemail.uncp.edu

Transfer Information

Name of Institution to be attended

Major	Course to be taken in (TERM/YEAR)	
	T E R M / Y E A R	

Course Request				UNCP Equivalent DO NOT WRITE HERE – OFFICE USE ONLY		
Dept.	Course #	Course Title	Credit Hrs.	Dept.	Course #	Credit Hrs.

Student Signature		Date	
Advisor/Dept. Chair Signature		**Date**	
Registrar Signature		**Date**	