



TRANSFER OF GRADUATE CREDIT TOWARDS MASTER'S DEGREE

Generally, all work for the master's degree must be completed at UTSA. Transfer credit of usually no more than six semester credit hours may be allowed for graduate coursework completed at another accredited institution upon the approval of the appropriate Graduate Program Committee in which the degree program is located. This petition may allow a maximum of one-third of the semester credit hours of coursework (exclusive of thesis) required for a degree at UTSA to be accepted as transfer credit for the degree. This form must be completed by the department.

COURSES TO BE TRANSFERRED

STUDENT INFORMATION

Name of Institution	Semester Taken	Course Number and Name	Hours	Equivalent Grade	UTSA Equivalent Course	Credits to be used to fulfill the requirements checked below
						☐ Elective ☐ Core course ☐ Other
						☐ Elective ☐ Core course ☐ Other
						Elective Core course Other
						Elective Core course Other
						Elective Core course Other
						Elective Core course Other
						Elective Core course Other
						Elective Core course Other
						Elective Core course Other

^{*} The courses listed above must have a grade of B or better, be from an accredited university, and not have been used in another degree program.

TRANSFER OF GRADUATE CREDIT TOWARDS MASTER'S DEGREE If transfer courses will be substituted, please provide the justification in the section below. **JUSTIFICATION FOR SUBSTITUTION OF COURSES APPROVALS** Time Limit for Completing Master's Degree: Master's students have a time to degree completion of six years. ☐ The courses requested for transfer do not exceed the time limit for completing the degree. ☐ This degree program is _____ hours and the Graduate Advisor recommends approval of ____ transfer hours. The majority (over 51%) will be completed at UTSA. ☐ Approve ☐ Disapprove Graduate Program Committee, Signature Print Name Date ☐ Approve ☐ Disapprove Print Name Department Chair, Signature Date

THE GRADUATE SCHOOL

Associate Dean, Signature

Based on the College's recommendation, I hereby

Approve

Deny the request.

Print Name

Vice Provost and Dean of The Graduate School, Signature

Date

Date

☐ Approve ☐ Disapprove