

TRANSFER COURSE INFORMATION

Course Department & Number: _____ Course Semester Credit Hours: _____

Course Title: _____

Course Description:

TRANSFER INSTITUTION INFORMATION

Institution Name: _____

Transfer Date: _____

Equivalent Course Department, Number, & Name at UAH:
(e.g. CM 113 Introduction Rhetorical Communication)

Department & Number	Name

STUDENT INFORMATION

Name: _____

A#: _____

COMMENTS

APPROVAL INFORMATION

Department Chair Signature

Date

Send Completed forms to Registrar's Office, Student Services Building 120; or email with digital signature to registrar@uah.edu.

OFFICE USE ONLY

Added to Articulation Catalog

Processed: _____
Signature Date