Lewis & Clark College
Graduate School of Education and Counseling

Request for Transfer Credit Form

Students may request to transfer credits from another institution. Please note:

- The maximum number of transfer credits allowed is 10 semester credits of graduate level credit to a master's degree program and 14 semester credits to the doctoral program in Educational Leadership, earned no more than five years prior to admission.
- Transfer courses must have a minimum grade of B-. CR/NC or Pass/Fail courses may be accepted if the course catalog or transcript key states that the grade granted is equivalent to a grade of B- (3.0) or higher.
- A course description or syllabus must be submitted for each course
- Requests for transfer credit must be approved by the Program Director

_____   _____   _____
Last name   First name   Date

_____   _____
LC ID#   LC Email Address

_____   _____
Academic Program   Term of matriculation at Lewis & Clark *(ex: Fall 2021)*

Transfer Course(s)

List the information for the course(s) you wish to transfer in the fields below. Maximum two courses per form.

_____   _____   _____
Course No. *(ex: SPED 501)*   **Title of Course** *(ex: Theory of Special Education)*   **Credits earned** *(ex: 4 credits)*

_____   _____   _____
Course No.   **Title of Course**   **Credits earned**

☐ **Quarter**   ☐ **Semester**

_____   _____
Transfer Institution *(ex: Portland State University)*   **Term completed** *(ex: Fall 2020)*

☐ I will attach a course description/syllabus for each course to this form

Lewis & Clark Degree Requirement

List the degree requirement that you wish to satisfy using the transfer course(s) listed above.

_____   _____   - OR -   _____
Course No. *(ex: PSY 100)*   **Title of Course** *(ex: Intro to Psychology)*   **Requirement** *(ex: "Elective credits")*

_____   _____   - OR -   _____
Course No.   **Title of Course**   **Requirement**

To be completed by the Program Director:

☐ **I approve the petition requested above.** Comments: _____

_____

_____   _____   _____
Name of Program Director   **Signature of Program Director***   **Date**
                                                       **Form can be sent directly from your LC email account in lieu of a signature*