

Transfer Course Review – Department of Economics – 110 Marshall-Adams Hall

Name _____ PID _____

Major _____ College _____

MSU e-mail _____ Phone _____

Course Requested (separate form required for each course)

Full name of School _____

Location _____
City State Country

Dates of attendance/planned attendance _____

Course Number at other school _____ Course Title _____

Number of Credits _____ circle one: Semester Quarter Unit Other

Provide the following web addresses from the school where the course was completed:

Home page _____

Economics Department website _____

Description of Courses website _____

Attach the following:

- Copy of the course description in English.
- Copy of the course syllabus in English.
- Copy of transcript (if course already completed) showing successful completion (minimum 2.0 required).

You will be notified if additional information is necessary and whether the request is approved or denied.

For Office Use Only

Date Received _____

Date Reviewed _____ Decision: _____

TransferMSU _____ E-mail to student _____