

Office Location: 271 Huntington Avenue • Phone: 617.373.2300 • Fax: 617.373.5351 • registrar@neu.edu • www.northeastern.edu/registrar
Mailing Address: Northeastern University, ATTN: Office of the Registrar, 230-271, 360 Huntington Avenue, Boston, MA 02115-5000

FOR OFFICE USE ONLY

TR_PET _____

N _____

1. STUDENT INFORMATION—Student completes the following section:

NUID - Name _____

Phone _____ Email _____

Expected graduation year _____ College _____ Program _____

Reason for transfer credit request:

- Clear a deficiency for the following NU course (enter NU course number) _____
- Course is not offered at Northeastern
- Transfer credit information received after matriculation
- Other (please explain) _____

2. INSTITUTIONAL INFORMATION—Student and academic advisor complete the following section:

Name of institution where course would be taken _____

Institution's city _____ State/country _____

- The institution is already on the registrar's transfer-credit Web site (www.northeastern.edu/registrar/tca.html).
- This is a new transfer institution. (Please email the Office of the Registrar for approval with as much information as you have—accreditation, grades, type of credit—before proceeding to the next step.)

3. COURSE INFORMATION—Student and academic advisor complete the following section:

- The course already exists on the registrar's transfer-credit Web site (www.northeastern.edu/registrar/tca.html).
- No equivalency exists because the course is in the degree audit as "No Rule." Academic advisor has course evaluated via TRS.
- No equivalency exists, but the departmental/faculty approval is attached.

Transfer course number _____ Credits _____ Semester hours Quarter hours

Transfer course title _____

NU equivalent course number _____ From the registrar's transfer-credit website New course evaluated

4. STUDENT SIGNATURE

I understand that a change to any of the information on this petition requires me to seek additional review and reapproval. I understand that I must receive a grade of C or better in order for the course to transfer. I understand that the grade does not transfer and that an original grade from NU, if applicable, will remain on my transcript. I understand that I must provide an official transcript to my advisor within the term following the course completion.

Signature _____ Date _____

5. PREAPPROVAL—Transfer credit must be approved before the student takes the course.

Advisor's name (please print) _____

Preapproved? Yes No Advisor's signature _____ Date _____

6. FINAL APPROVAL

Final approval? Yes No Advisor's signature _____ Date _____

7. REGISTRAR'S OFFICE—The registrar's office will add the transfer work to the degree audit system, and it will be uploaded at the scheduled transfer load to student transcripts during the term.

Received _____ Completed _____ Date _____