

## Application for Transfer Credit

This section should be completed by the student and submitted to the DGS or Program Director.									
STUDENT NAME				First:			М	F	
STUDENT PID	C00		STUDENT UNI		FIRST TERM OF REGISTRATION				
MA on	nly	MA/MPhil/PhD	DEPARTMENT OR PROGRAM						
NAME OF PE						DEGREE SOUGHT			
DATES ENROLLED AT ABOVE INSTITUTION					DATE DEGREE AWARDED (IF APPLICABLE)				
By signing below, I acknowledge the following: Students who receive two Residence Units of transfer credit for an MA completed at Columbia or elsewhere must complete the MPhil and the prospectus defense within three years from initial registration in the PhD program, and the PhD within eight years from initial registration in the PhD program.									
STUDEN	STUDENT SIGNATURE DATE								
This section must be completed by the DGS or Program Director and submitted to the GSAS Office of Student Affairs (107 Low Library or gsas-studentaffairs@columbia.edu).  For MA or PhD Students:  This student has previously completed graduate courses that fulfill certain program requirements. I have reviewed this student's request and recommend that GSAS grant points of Transfer Credit and Residence Unit(s), in recognition of the following courses:  To the extent possible, please review course descriptions, syllabi, and final exercises required for the course(s) listed above.									
For	further in	nformation, see gsas.co	olumbia.edu/node/29.		·				
For Ph.D. Students only:									
						for the PhD degree, and I reco the department's en route MA		l	
Addition	nal comm	ents:							