

ALICE LLOYD COLLEGE  
TRANSFER CREDIT REQUEST

Name: \_\_\_\_\_ Date: \_\_\_\_\_

ID Number: \_\_\_\_\_ Requested for \_\_\_\_\_ Semester of \_\_\_\_\_ Year

**\*Have you taken this course equivalent at ALC and retaking it at the school listed below?**

**YES** or  **NO**

School Planning to Attend: \_\_\_\_\_

List of Courses:

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

Credit Toward Major: \_\_\_\_\_ Credit Toward Graduation: \_\_\_\_\_

Have you been granted previous requests? \_\_\_\_\_

Number of Hours Transferred To Alice Lloyd College: \_\_\_\_\_

Number of Hours Transferred Since Attending ALC: \_\_\_\_\_

Declared Major: \_\_\_\_\_

\_\_\_\_\_  
Student Date \_\_\_\_\_

\_\_\_\_\_  
Advisor Date \_\_\_\_\_

\_\_\_\_\_  
Division or Department Chairperson Date \_\_\_\_\_

\_\_\_\_\_  
Academic Dean Date \_\_\_\_\_

\_\_\_\_\_  
Registrar Date \_\_\_\_\_

PLEASE ATTACH A COURSE DESCRIPTION OF COURSE(S) TO BE TAKEN.