

The assessment of transfer credit is essential both for you, the student, and Trinity Western University. In the process of evaluating your transfer credit we have attempted to carefully assign credit for work completed at other institutions in a manner consistent with Trinity Western University's policies. **This form should be completed if you have concerns regarding credit that has been assigned and would like your assessment to be reviewed.** You will also be required to **include any necessary supporting documents, specifically the syllabus for the course.** You may also include additional course information, assignments, etc.

**PROCEDURE:**

1. Complete form and attach required supporting documents.
2. Send form and documents to [transfer@twu.ca](mailto:transfer@twu.ca) or hand in to the Office of the Registrar.  
We will inform you of the appeal decision via the email provided in 1-4 weeks.

**SECTION A - STUDENT INFORMATION**

<b>LAST NAME</b>	<b>FIRST NAME</b>	<b>TWU ID NUMBER</b>
<b>EMAIL:</b>		<b>ANTICIPATED GRADUATION (MM/YY):</b>
<b>DEGREE/MAJOR:</b>	<b>ADVISOR:</b>	

**SECTION B - APPEAL INFORMATION**
**ORIGINAL COURSE** *Course being requested for appeal.*

TRANSFERRING INSTITUTION <i>(The school the course was taken at)</i>	COURSE CODE <i>Ex. PSYC 105</i>	SEM. HRS	COURSE TITLE

	COURSE CODE <i>Ex. PSYC 105</i>	SEM. HRS	COURSE TITLE
<b>ORIGINAL TWU TRANSFER EVALUATION:</b>			
<b>REQUESTED TWU COURSE:</b>			

**REASONING** Please explain the reason why you believe this course should be re-evaluated:

**ATTACH SUPPORTING DOCUMENTS (REQUIRED):** Please attach the applicable syllabus, supplementary course documents, coursework, etc. **NOTE:** The syllabus *alone* will not suffice, as it was already evaluated on its own merit and therefore is not sufficient proof alone for a change in decision.

_____ <b>Student Signature</b>	_____ <b>Date</b>
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