Submit this form to the Office of the Registrar, once you receive your approved WDA Authorization & Course Registration form and the transfer course syllabi from the Host Institution.

|  |  |
| --- | --- |
| STUDENT NAME:      | STUDENT ID#:      |
| STUDENT EMAIL:      | STUDENT PHONE:       |
| DEGREE:      | PROGRAM:      |
| HOST INSTITUTION:      | HOST INSTITUTION CITY/PROV:      |

**Note to Program Director**: As WDA transfers credits are for non-equivalent TWU courses, please designate a 500 or 600 level Course Code to the transfer course (e.g. MBA 500 or EDUC 600). [\*The Course Code will not be an equivalent transfer (e.g. RELS 640).]

|  |  |
| --- | --- |
| **Host Institution Course Details** | **TWU Transfer Course Details****(To be completed by Program Director)** |
| Course Code | Course Name | Credits | Course Code & Name | Credits | Approved by |
|       |       |       |       |       |       |

**This transfer course fulfills**: [ ]  Elective [ ]  Core Requirement [If this course fulfills a Core Requirement, the student will need to submit an Exception to Graduation form, available through the Office of the Registrar.)

**Note to Student**: Upon completion of the course and for the transferal of credit, you must order for an ***Official Transcript*** from the Host Institution to be directly delivered to TWU’s Office of the Registrar at the address below [\*Your copy of a copy sent by you is NOT considered official.]:

Attn: Transfer Credit

Office of the Registrar

Trinity Western University

7600 Glover Road

Langley, BC V2Y 1Y1

Permission to enroll in the course indicated above is subject to the approval of the Host Institution and the following:

* Transfer Credit only granted upon completion of the course with a passing grade based on the grade scale of your Program.
* For substitutions or changes in course enrollment, you must contact the Office of the Registrar in writing.

|  |  |
| --- | --- |
| STUDENT’S SIGNATURE: | DATE:      |
| NAME OF PROGRAM DIRECTOR:      | SIGNATURE OF PROGRAM DIRECTOR: | DATE:      |