

NORTH COUNTRY COMMUNITY COLLEGE

APPEAL OF TRANSFER CREDIT

Name: _____
Last First M.I.

Semester First Matriculated: _____ Program: _____

1. I request the following course(s) be transferred in:

Course/Title	Transfer College	Credits
_____	_____	_____
_____	_____	_____

2. The following reason(s) are offered as justification for granting this request:

_____ Date: _____
Student Requesting Transfer

Approvals:

VP for Academic Affairs: _____ Date: _____

Registrar: _____ Date: _____

Original: Records c: Academic Affairs