

STUDY AT ANOTHER INSTITUTION/TRANSFER CREDIT

Please initial each line in the first section and complete the requested information before submitting to the registrar.

I want to enroll in a course(s) at another institution and transfer credits to Academy for Five Element Acupuncture.

I understand that once I complete the course(s) I must have a minimum completion grade of "C" and have an official transcript sent to the Academy in order to receive transfer credit.

I authorize the Academy to share my personal information with the approved institution when it is for the purpose of enrollment in a course(s).

I understand that if I receive Financial Aid at the Academy I will not qualify for, nor can I request, Financial Aid (Title IV or otherwise) from another institution. *(Please notify the Academy if you do not register or decide to drop a course)*

Submission Date:

Student's full name				Today's Date		
Phone			Email			
Information of the institution at which you wish to study:	Name of institution					
	Address					
	Phone					
	Fax					
	Contact Person					
Course Title		Course Start Date	Course End Date	Course Number	# of Credits	Term/year you plan to enroll in the course
1.						
2.						
3.						

REGISTRAR'S OFFICE USE ONLY						
Courses approved	1	2	3	Courses NOT approved	1	2 3
Date approved/denied				Registrar's Office Approval by		