

**Ohio Wesleyan University Office of the Registrar
Permission to Transfer Courses**

Student Name: _____ Student ID: _____

Major(s): _____ Minor(s): _____

I request permission to take the following course(s) at:

_____ During the _____
Accredited College or University Semester/Term Year

Please read the following and sign your name indicating your consent to the following:

1. I understand that I must provide accurate and legible course codes and course titles on the form below. I may also be required to obtain course description(s) and syllabi (if requested).
2. I understand that I am to register for the course for credit. (I may not audit the course.)
3. I understand that only those courses in which I earn a grade of C- or better are transferable. If a course is only offered as Pass/Fail we must have verification from the University that a passing grade is equivalent to a C- or above in order for credit to be transferred.
4. I understand that one OWU Unit is equivalent to 3.70 semester hours or 5.55 quarter hours. For institutions (especially international) that use different credit systems, the Registrar will convert transfer credits to equivalent OWU units.
5. I understand that I am responsible for requesting that an official transcript be issued to Ohio Wesleyan University, Office of the Registrar – Transfer Evaluation, 61 South Sandusky Street, Delaware, OH 43015 upon the satisfactory completion of the course(s).

_____ Student Signature _____ Date

Transfer Institution <i>(completed by student)</i>			Ohio Wesleyan University <i>(office use only)</i>		
Course Code	Transfer Course Title	Credit Hours	Course Code	OWU Course Title	OWU Units

Visit <https://owu.edu/transferinfo> for a list of pre-approved transfer credit equivalencies!

Return this completed form to the Office of the Registrar – Transfer Evaluation at transfer@owu.edu