

Melbourne campus students must get verification of transferability from the Office of the Registrar *before* having the form signed and returned to the registrar's office. *A student may take up to three courses at other institutions for transfer to a Florida Tech undergraduate degree program.* **Florida Tech Online students** sign form, provide course descriptions and email to OL-tce@fit.edu, affixing only student signature; additional approvals added by evaluator. **All students:** Course descriptions must be attached when submitting request. *This form does not constitute approval to take course(s) at another institution.* Students will be notified by email from the appropriate office. *Students must request an official transcript be mailed from the approved institution directly to Florida Tech. Hand-carried transcripts are not considered to be official.*

SEND TO: Melbourne Campus Students: OFFICE OF THE REGISTRAR DATE _____
Florida Tech Online Students: EMAIL: OL-tce@fit.edu

FROM: _____
Last First Middle Student ID Number

I request approval to enroll in the course or courses listed below for transfer credit to Florida Tech. I understand the grades must be C- or better for courses to transfer; the grades themselves and GPA will not transfer; and the Forgiveness Policy does not apply.

The request MUST be received and approved by the appropriate office (see above) prior to registering for the course or courses.

Term I plan to attend _____ OFFICE USE ONLY: Institution code _____

Institution's name _____

Please Answer: Are you an international student? Yes No

International Student and Scholar Services _____ Date _____

Print name _____

Please Answer: Are you receiving VA benefits? Yes No

VA Certifying Official _____ Date _____

Print name _____

Did you petition to graduate? Yes No If yes, for which term _____

Student Signature _____

STUDENT USE			DEPARTMENT USE	TCE USE ONLY
COURSE NUMBER	COURSE TITLE	QTR/SEM CREDITS	FLORIDA TECH EQUIVALENT	

MELBOURNE CAMPUS ADVISOR: Please initial one

- The course or courses requested are not offered through Florida Tech Online during Summer-1 or Summer-2.
- The course or courses requested would be more advantageous to the student in a classroom format.

Approved (Choose one)

Academic Advisor _____ Date _____ YES NO

Print name _____

Department Head / Program Chair _____ Date _____ YES NO

Print name _____

DISTRIBUTION:
 Original—Registrar
 Fax—Florida Tech Online
 Copy—Academic Unit

Florida Institute of Technology ■ Office of the Registrar

150 West University Boulevard, Melbourne, FL 32901-6975 ■ 321-674-8115 ■ Fax 321-674-7827

RGR-356-318