



COURSE EQUIVALENCY ASSESSMENT

TO STUDENT

1. Complete all information requested and attach official course descriptions for each course below from the official college website or college catalog. Make sure the college name appears on the page or attach additional pages with college information.
2. Allow five (5) working days for the form to be reviewed by the Registrar. This form must be picked up by you or by an individual with a letter from you releasing the information with a valid ID.
3. A grade of "C" or better must be earned for credit to transfer.
4. It is your responsibility to have an official transcript sent from the other college to the FIT Registrar's office when you complete the course. You must be in matriculated status and in good standing to be awarded transfer credits. Transfer credit is awarded as a "T" grade rather than the grade earned and will not affect your grade point average at FIT.

STUDENT AND COURSE INFORMATION

<p>_____ STUDENT NAME</p> <p>_____ FIT ID/SOCIAL SECURITY NUMBER</p> <p>_____ MAJOR AAS (1YR OR 2 YR) BS OR BFA</p> <p>_____ FIT EMAIL</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 70%;">TRANSFER INSTITUTION</td> <td style="width: 30%;">IS THE COURSE APPROVED</td> </tr> <tr> <td><u>NAME & NUMBER OF THE COURSE(S)</u></td> <td><u>BY THE REGISTRAR?</u></td> </tr> <tr> <td>_____</td> <td style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> <tr> <td>_____</td> <td style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> <tr> <td>_____</td> <td style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> </table>	TRANSFER INSTITUTION	IS THE COURSE APPROVED	<u>NAME & NUMBER OF THE COURSE(S)</u>	<u>BY THE REGISTRAR?</u>	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO	<p>_____ TRANSFER INSTITUTION</p> <p>_____ MINI-SESSION AND YEAR</p> <p>_____ CURRENT SEMESTER STATUS</p> <p>_____ TELEPHONE</p>
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HOW MANY CREDITS ARE YOU REQUESTING TO TAKE AT OTHER INSTITUTION(S) FOR THIS SESSION? _____

HOW MANY CREDITS ARE YOU REGISTERING FOR AT FIT FOR THIS SESSION? _____

INSTITUTION OFFERING COURSE

As of this date, the student, whose name appears above, is a matriculated student at the Fashion Institute of Technology. Upon completion of the above signed courses, the student will be eligible to request transfer credits if he/she remains in matriculated and good standing. This is subject to review.

REGISTRAR'S SIGNATURE

DATE