

OFFICE OF THE REGISTRAR registrar@asbury.edu

## PRE-APPROVED COLLEGE TRANSFER (PACT) UNDERGRADUATE

This form is required for students currently enrolled in an undergraduate program who desire to earn additional credits at another institution to apply toward a degree at Asbury University. Processing time is approximately 5 business days. Please reference Asbury University's pre-approved college transfer credit policy in the Bulletin for more information.

Full Name [print]:		ID#:					
Major(s):	Grad Date:						
Transferring Institution	n:						
City/State of Institution:			_ Requesting for Semester/Year:  Asbury Equivalent Course				
Courses to be Tak							
Prefix/# Title	fix/# Title Credit		Prefix/#	Title		Cı	redit Hours
(  Approved)	☐ On-Campus	□ Online	Used as:	☐ Foundations	☐ Major	☐ Minor	□ Elective
Prefix/# Title	Cr	edit Hours	Prefix/#	Title		Cı	redit Hours
(  Approved)	☐ On-Campus	□ Online	Used as:	☐ Foundations	☐ Major	☐ Minor	☐ Elective
Prefix/# Title	Cr	edit Hours	Prefix/#	Title		Cı	redit Hours
(□ Approved)	☐ On-Campus	□ Online	Used as:	☐ Foundations	☐ Major	☐ Minor	□ Elective
A posted grade of "C" o request an official trans The course/s will transfo	cript to be sent di	irectly to As	bury Universi	ty once all fina			
These courses will show wi Asbury University GPA. The includes AP, CLEP, and mi expires 9 months from the s	e student must not h litary credit). If gran	nave reached ted transfer p	the transfer cre re-approval, per	dit limit for their mission to regist	program or er for the	r degree (tl	his
Student's Signature		Date:					
	By signing, I indi	cate that I ha	ave read and ur	nderstand the a	bove polic	;y.	
Completed by:	Registrar Approval				Received		
If stamped with official seal and Registrar signature, this student is in good standing at Asbury University. The student has permission to enroll in these approved courses and to transfer the credits back to							

Asbury University.