

Transfer Credit Approval

Records Office

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Students wanting to transfer credits from another college or university to AGTS must complete and submit this form **prior to enrolling** in the course. This applies to all courses, regardless of delivery method, taken while enrolled or considered a student at AGTS. Courses taken without approval may not be accepted for credit toward your degree.

Student n	ame		Date		
Student n	umber		Email		
College/l	Jniversity where	e course will be taken			
Location:	City		_ State		
Type of C	redit: 🗌 Seme	ester Hours 🔲 Quarter Hours	s □ Other		
Term of E	nrollment: 🗆 f	Fall 🗆 Spring 🗆 Summer [Other	Year _	
Course to	transfer to AG	TS:			
Dept	Course #	Course Title			Hours
AGTS equ	ivalent:				
Dept	Course #				Hours
Signature	s required				
Student					ate
Registrar					ate
Academi	c Dean			D	ate
Records (Office use only				
Credit hours accepted Entere			ed by	D	ate