



UNIFORMED SERVICES UNIVERSITY OF THE HEALTH SCIENCES

OFFICE OF THE UNIVERSITY REGISTRAR
4301 JONES BRIDGE ROAD BETHESDA, MARYLAND 20814-4799
www.usuhs.edu

Graduate Transfer Credit Evaluation Form (New Admitted Students)

This form must be turned into the USU Office of the University Registrar (OUR) at the time of admissions for newly admitted students by the academic program. The official transcript must be submitted to OUR as part of the application for admission or be submitted to OUR directly from the transfer institution. All documents will be stored in the student file and used to post USU credit within the OUR.

In accordance with the USU Instruction on Transfer Credit, transfer credit(s) completed prior to USU attendance must be posted to the student's official USU transcript by the end of the second full semester of attendance at USU.

Forms are submitted to usutranscript@usuhs.edu with the subject header: TRANSFER CREDIT EVALUATION FORM

Course equivalencies (core or elective) indicated on this document will be used toward USU degree requirements. Please contact OUR should you have any questions on how to complete the required information.

Transfer credits from courses successfully completed at outside institutions are transcribed with a 'CR' grade and not calculated into the USU qualitative measurement of GPA.

Student Name:			Student ID:	
Program/ Degree:			Student Email Address:	
Со	ourse(s) to be approved for transfer	evaluation:		
1.	College/University Name:			
	Course Code and Title from Exter	nal Institution:		
	Credit Hour:	_		
	USU Course or Degree Equivalen	cy:		
	USU Course Credit Hour Amount:			
	Will this course fulfill Core	or Elective	Requirements? (Please check one)	
2.	University/College Name:			
	Course Code and Title from Exter	nal Institution:		
	Credit Hour:			
	USU Course Credit Hour Amount:			
	Will this course fulfill Core	or Elective	Requirements? (Please check one)	
3.	University/College Name:			
	Course Code and Title from External Institution:			
	Credit Hour:		_	
	USU Course Credit Hour Amount:			
	Will this course fulfill Core		Requirements? (Please check one)	

OFFICIAL GRADUATE SCHOOL US	SE ONLY:		
Approved:			
Denied:			
Associated Dean Name: (Print):			
Associate Dean Signature:		Date:	
Courses taken at an exte	rnal institution without an exa	ct USU course equivalency may be considered for	
		cording to the program requirements. Semester credits	
will be awarded in accord	ance with Instruction XXXX.		
Direct course equivalenci	es should include the USU co	ourse code and course title (will not have to use the	
elective equivalencies be		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Analytics		Methods	
ANYS 5901 – Analytics Elective I		MTDS 5901 – Methods Elective I	
ANYS 5902 – Analytics Elective II		MTDS 5902 – Methods Elective II	
ANYS 5903 – Analytics Elective II		MTDS 5903 – Methods Elective III	
ANYS 5904 – Analytics Elective IN		MTDS 5904 – Methods Elective IV	
Basic Science		Research	
BSCI 5901 – Basic Science Elective	e I	RSCH 5901 – Research Elective I	
BSCI 5902 – Basic Science Elective	e II	RSCH 5902 – Research Elective II	
BSCI 5903 – Basic Science Elective	e III	RSCH 5903 – Research Elective III	
BSCI 5904 – Basic Science Elective	e IV	RSCH 5904 – Research Elective IV	
Bio Bohovioral Science		Social Science	
Bio-Behavioral Science BISC 5901 – Bio-Behavioral Scien	ce Flective I	Social Science SSSC 5901 – Social Science Elective I	
BISC 5902 – Bio-Behavioral Scien		SSSC 5902 – Social Science Elective II	
BISC 5903- Bio-Behavioral Science	ce Elective III	SSSC 5903 – Social Science Elective III	
BISC 5904 – Bio-Behavioral Scien	ce Elective IV	SSSC 5904 – Social Science Elective IV	
<u>Leadership</u>		Theory Theory	
LDSP 5901 – Leadership Elective		THRY 5901 - Theory Elective I	
LDSP 5902 – Leadership Elective LDSP 5903 – Leadership Elective		THRY 5902 - Theory Elective II THRY 5903 - Theory Elective III	
LDSP 5904 – Leadership Elective		THRY 5904 - Theory Elective IV	
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OFFICE OF THE UNIVERSITY REG	ISTRAR:		
Date Received: 0	NIP Penrecontative Name:		
Date Neceived.	on nepresentative Name		
Date Posted: E	Date Student Notified:		

Comments: