

# The University of Iowa School of Music

## REQUEST FOR GRADUATE TRANSFER CREDIT

Student Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Major Area: \_\_\_\_\_ Degree Program: MA DMA PhD  
(circle one)

Course Name: \_\_\_\_\_ Course #: \_\_\_\_\_ S.H.: \_\_\_\_\_

Instructor of Course: \_\_\_\_\_ Grade Earned: \_\_\_\_ YR Taken: \_\_\_\_

Name of Institution Where Course Taken: \_\_\_\_\_

- Course Description attached
- Course Syllabus attached
- Papers or other pertinent material of significance from the course attached
- Copy of Transcript Provided
- Please use Transcript from student file

I am requesting transfer credit to be applied to:

- Music Theory
- Music History
- Applied Music
- Other \_\_\_\_\_

Request forwarded to: \_\_\_\_\_ Date: \_\_\_\_\_.

Faculty Recommendation:

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Faculty Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*For Office Use Only:*

Date to Associate Director of Graduate Studies: \_\_\_\_\_

Transfer Credit Approved: \_\_\_\_\_

Transfer Credit Not Approved: \_\_\_\_\_

Signature

Associate Director of Graduate Studies: \_\_\_\_\_ Date: \_\_\_\_\_

Student Notified of Decision: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Advisor Notified of Decision: \_\_\_\_\_ Date: \_\_\_\_\_