



## Request for Transfer Credit from Previous Institution

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

Major : \_\_\_\_\_

Degree: [ ] Undergraduate [ ] Graduate

Please list all of your previous Institutions' earned units and degree(s) if applicable to be reviewed by Kernel University.

#	Name of Institution(s)	Degree Earned	Units Earned
1.			
2.			
3.			
4.			
5.			
Total Earned Units to be Reviewed			

I am requesting for evaluation of the official transcript(s) to receive transfer credit units from previous institution(s).

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

TO BE FILLED OUT BY KERNEL UNIVERSITY OFFICIALS		
Previous Institution(s)		
	Total Approved Units	
Required Units in KU	Total ____ Units – ____ Units = ____ Units	

Chief Academic Officer: \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Payment Information for Processing Fee	
<input type="checkbox"/> Visa <input type="checkbox"/> Master <input type="checkbox"/> American Express	Card Number: _____ CVV: _____
Name on Card: _____	Expiration date: ____ / ____ (mm/yy) Zip Code: _____