

## **Transfer Credit Request**

## Registrar's Office 20575 Thorne Avenue Maple Ridge, BC V2X 9A6

Email: rmc@sd42.ca

Original Date Received by Administration Office		

You must Include a copy of your transcripts, course description, calendar description and/or course outline for each course for which you apply. If you do not include the required supporting documents, your request will not be processed. Note: you must have a grade of "C" or better to obtain transfer credit for a course.

Today's Date (YYYY-MM-DD):		Student Number:	
Student name (Last/First):	Program	m:	
Requesting transfer credit for course	s(s) (list all):		
Documents attached for each course	e requested (check all that apply):	:	
□ Course outline (preferred)	□ Calendar Descriptions	□ Certificates	
□ Other (Please list):			
Ridge Meadows College is committee applicable provincial and federal priving have the college use the submitted in services of a typical post-secondary e	vacy legislation. By completing this nformation for purposes consistent	form, you are consenting to	
Signature		Date	
	Decision (Office Use Only)		
Date:	Total Credits granted:		
RMC Courses for which credit has been granted:			
Notes:		<del></del>	
Signatures:			
Program Chair (or Mana	ager)	Admissions	