Transfer of Credit Policy

Please read the information below before submitting requests for transfer credit.

Students accepted for admission may be granted transfer credit for graduate level courses previously taken at another accredited institution. A maximum of twelve (12) credit hours may be transferred into a M.A. program and a maximum of twenty-four (24) credit hours may be transferred into the Psy.D. program.

Eligibility

Graduate courses from regionally accredited institutions that are equivalent to courses required in the students’ degree program at Adler School and in which students have earned grades of “B” or better may be considered for transfer credit. Requests for transfer credit into the PsyD program must have been taught by faculty who has a doctoral degree.

Electives and clinical credits are not eligible for transfer credit. Coursework completed more than five years prior to enrollment will not be accepted for transfer credit. Credit hours granted for transferred courses are based on credit hours granted for the equivalent course at Adler School.

Processing Fee & Processing Time

A Transfer Credit Processing Fee of $170 is assessed for each course evaluated for transfer credit eligibility (whether approved or denied). Your requests for transfer credit are reviewed by your Advisor and/or Program Director/Chair. The processing time for this request requires approximately 30 business days. If the Transfer Credit Request is approved, the Office of the Registrar will update the student’s academic record within seven business days of receipt from the Advisor or Program Director/Chair. The student copy of the approval or denial will be either e-mailed to the student’s Adler e-mail account or mailed to the student’s address on record.

IMPORTANT – Please follow the directions outlined below. Students who circumvent the process and students who submit incomplete documentation will have their packets returned. The Office of the Registrar is not responsible for documentation submitted outside of the directions listed below.

DIRECTIONS:

1. Please complete Section I on the attached form and return it to the Office of the Registrar (15th floor) with the following documents:
   - Official or Unofficial Transcript
   - Course Syllabus
   - Payment ($170 for each assessed course)

Your request will not be accepted by the Office of the Registrar unless Section I is complete and all required documents are included together. Please note the required documents mentioned above will not be returned, so please do not submit originals and make copies for your records.
Transfer of Credit Request

Please complete Section I of this form and return it to the Office of the Registrar with a copy of your official/unofficial transcript, course syllabus, and payment. Your request will not be accepted by the Office of the Registrar unless Section I is complete and all required documents are included together. It is important for you to know that these documents will not be returned, so please do not submit originals and make copies for your records. The transfer credit processing fee is $170 for each course (whether approved or denied). This form needs to be completed for each course you wish to have assessed.

Section I: To Be Completed by the Student (PLEASE PRINT)

Last Name: ___________________ First Name: ___________________ Date: ______________

Last 4 of SSN/Student ID: ___________________________ Advisor: ______________________

Degree Sought: ☐ M.A. ☐ Psy.D. Program: __________________________ Entry Year: ___________

Requesting Transfer of (Adler course title): __________________________ Course Number: __________

Title of Course Taken at Other Institution: __________________________ Course Number: __________

Institution at Which Course was Taken: _________________________________

Year Taken: __________________ Course Start Date: ___________ Course End Date: ___________

Course Level: ☐ Master ☐ Doctoral Units: ☐ Semester ☐ Trimester ☐ Quarter

If enrolled in the PsyD program, does the instructor who taught this course have a doctoral degree?:

☐ YES (if ‘YES’ syllabi needs to indicate such) ☐ NO (if “NO” the course is not eligible for transfer credit)

Grade Received: _______ Number of Credits Earned: _______ Method of Payment: ☐ Credit Card ☐ Check

Signature: ________________________________ Date: _________________

By signing this document, I understand that I am requesting to transfer credits from another accredited institution to the Adler School of Professional Psychology. In addition, I have read and understood the school’s Transfer Credit Policy. I also understand that I am responsible for the Transfer Credit Processing Fee of $170 for each course evaluated for transfer credit eligibility. I further understand that I will be charged this fee regardless of being approved or denied by the Faculty Reviewers below.

Section II: Faculty Advisor Recommendation Review

☐ APPROVED ☐ DENIED Date Received: ___________________________

Faculty Printed Name: _____________________________________________

Signature: _________________________________________________________

Comments: ____________________________________________________________________________

______________________________________________________________________________________

Section III: Program Director Final Review

☐ APPROVED ☐ DENIED Date Received: ___________________________

Faculty Printed Name: _____________________________________________

Signature: _________________________________________________________

Comments: ____________________________________________________________________________

______________________________________________________________________________________