Boston University School of Public Health
Transfer Credit and Waiver Policy and Form

Within specific guidelines, students in the School of Public Health degree programs may apply for transfer credit for any graduate-level courses or waiver of a specific course requirement based on coursework taken outside of the School of Public Health. The Transfer Credit and Course Waiver policy applies to courses taken at other schools within Boston University and at external institutions, including the schools in the Boston Area Consortium.

All requests for transfer credit will be considered on an individual basis. MPH students may transfer a maximum of eight (8) whole course credits that meet specific criteria, as outlined in the following section. Students in other degree programs (MS, PhD, or DrPH) should check with their program director regarding transfer credit policies for their specific degree program. MPH dual degree students are not eligible for transfer credit.

Credits for a course may not be split; the course credit is granted for whole courses. Grades assigned to transfer credits will not be included in the calculation of the student’s grade point average (GPA) at the School of Public Health.

A completed Request for Transfer Credit or Course Waiver Form must accompany each request, along with a course description, syllabus, reading list, official transcript, and any other materials requested by the department designee or the SPH Registrar. The Request for Transfer Credit or Course Waiver Form may be obtained from the bookcase outside the SPH Registrar’s office (Talbot 210C) and on the School of Public Health website. The SPH Registrar’s office staff will forward the request to the appropriate faculty member for review and approval of the content. The Registrar’s office staff is responsible for ensuring that the other criteria for transfer credit or waiver are met.

There are a small number of courses that are preapproved for transfer credit; they are listed in the Course Rotation Guide. Students must submit a transfer credit request for these classes but do not have to submit the additional documents (syllabus, reading list, transcript).

General Requirements for Transfer Credit

Current MPH students must have all courses preapproved through the SPH Registrar’s office. Current students in other degree programs must have all courses preapproved through their program director on the SPH Transfer Credit Form, and the completed forms should be submitted to the SPH Registrar’s office with the requested documentation. Students are advised that academic credits for courses taken at other schools and colleges, including Boston Consortium schools, may not transfer at the same numeric value as they are offered at the host school.

As part of the preapproval process, students are informed of the number of credits they may be awarded; therefore, it is vital that the student apply for preapproval.

All courses for anticipated transfer credit must meet the following criteria:
Courses must be officially documented as graduate-level courses.

Transfer credit is contingent upon completion of the course with a B (3.0) or better. Courses not graded with a letter grade (A, B, etc.) are not eligible for transfer credit. Official transcripts documenting the final grade(s) must be sent to the SPH Office of the Registrar.

Courses cannot have been used in the past or be used in the future towards another degree program.

Courses must be taken at an accredited US institution or an institution accredited by the Council on Education for Public Health (CEPH).

Courses must have significant, direct public health content. For example, foreign language courses would not be considered for transfer credit for the MPH degree, nor would an organic chemistry course.

Courses taken prior to matriculation must meet the above criteria, must have been taken, at a maximum, within the past five (5) years, and must not have been used toward the completion of another degree program. It is possible that completed courses may not be approved because the content in the field has changed.

**Maximum Transfer Credits Allowed**

SPH students may petition to have a maximum of eight (8) whole course credits transferred to meet degree requirements. MPH dual degree candidates may not apply for transfer credit. Transfer credit includes courses taken at Boston University schools or colleges that are not the home schools of the dual degree program. The 8-credit maximum may not apply to students who graduated from BU with a BA or BS and took SPH courses numbered 700 (or above) that did not apply to their bachelor’s degree.

**Online and Hybrid Courses**

Online or hybrid graduate-level courses at Boston University or at CEPH-accredited schools and programs may be considered for transfer credit or waiver according to the general requirements stated above. Should those requirements be met, Boston University courses transfer in at their assigned value. Credits for courses at other programs will be calculated as a percent of the total credits for the SPH degree program at the home school. For example, an online course granted 3 credits within a 55-credit MPH program would be 5 percent of the total program. Five percent of the MPH program at BU equates to 2 credits; therefore this class would be awarded 2 MPH credits. There is no rounding up.

Students will be considered for core or required course waivers should the online course align with the core or required course at SPH. For global health MPH concentrators or students studying on an F-1 or J-1 visa, courses that are similar to the global health core courses in Health Policy & Management and Social & Behavioral Sciences will be considered. Students in other degree programs requesting waivers from degree requirements through online coursework should speak to their program director.

International students must comply with immigration regulations regarding applying online courses to their degree program. Currently, international students studying under the auspices of an F-1 visa may
take no more than one class or three (3) credits of online or distance education course work per session, term, semester, trimester, or quarter.

**General Requirements for Course Waiver**

Current SPH students may petition to be waived from core course, concentration, or degree requirements based on previous coursework. Relevant courses must have been taken within the past five years. It is possible that completed courses may not be approved because the content in the field has changed.

Students must have earned a grade of B (3.0) or better in the classes in question. Students must complete a Request for Transfer Credit/Course Waiver Form and provide the requested documentation with the form to the SPH Office of the Registrar. Students may be asked to demonstrate their proficiency in the courses to be waived. The decision to grant a waiver is at the discretion of the department representative. Such waivers will not reduce the minimum number of course credits to be taken in their School of Public Health degree program.

**Students Who Completed BUSPH Credit during Their Undergraduate Years**

Students matriculating into the SPH who completed Boston University SPH graduate-level courses during their undergraduate years may seek to apply the credits to the MPH degree requirements. Students who are not part of an approved dual degree program must obtain a letter from their undergraduate school or college verifying that the credits were not counted towards the bachelor’s degree major or minor. The credits may not be double counted towards the bachelor’s degree major or minor and the MPH degree.

In all cases (single bachelor’s degree, minor, or 4+1 degree program students), a maximum of 16 credits of graduate coursework taken during the undergraduate years may be counted towards the MPH. Established SPH minimum grade policies apply.

Date initiated: January 2009

Date updated: January 2015
**Request for Transfer Credit or Course Waiver**

Student Name: ___________________________  ___________________________  Today’s Date: ___/___/___

  (First)  (Last)

BUID: U ___ / ___ ___ / ___ ___ ___ ___  Cell Phone: (_____ ) _____ - __________

Email Address: ____________________________________________  Planned Graduation Date: ________________

Program (Circle):  MS  MPH  DrPH  PhD  If MPH, circle concentration(s):  BS  EH  EP  HPM  GH  LW  MCH  SB

If not MPH or DrPH, list department: ________________________________

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Title</th>
<th>Institution</th>
<th>Semester &amp; Year Taken</th>
<th>Grade*</th>
</tr>
</thead>
</table>

*The course grade will be verified by the BUSPH Registrar’s Office when an official transcript is received. It is the student’s responsibility to request the official transcript to be sent to the SPH Registrar’s Office after course completion. Students must earn a B or better for transfer credit to be granted.

Please check the applicable box(es):

- I am seeking **transfer credit** for this course
- I am seeking a **waiver** of a requirement (no credit)

Justification/Comments:

____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

☐ I acknowledge that I have read and understood the requirements for awarding waiver or transfer credits. I recognize that to the best of my ability the provided information is true and accurate.

Student Signature: ___________________________  Date: ___/___/___

***For Registrar Use Only***

Total Contact Hours _____  BUSPH credits _____  Reviewing Dept. _____  Date Sent: _______

Course is eligible for:  ☐ waiver only  ☐ transfer credit  ☐ transfer credit + waiver of a requirement

***For Faculty Reviewer Use Only***

☐ Course was approved

☐ Waiver only  ☐ Transfer Credit – Concentration  ☐ Transfer Credit – Elective  ☐ Transfer Credit + Waiver

If waiver, please specify course waived __________________________

☐ Course was not approved (must provide justification)

Justification:

____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

Signed: ___________________________  Date ___________________________