COLLEGE OF ARTS AND SCIENCES
Transfer Course Equivalency Form

Step 1: Before submitting this form, please make sure to read and understand the college and university policies around transfer credits:

https://www.bu.edu/academics/cas/policies/transfer-credit/
https://www.bu.edu/academics/cas/policies/summer-study-at-other-universities/

- This form is for credits taken at a US institution. If you are taking courses from outside the US, please contact BU External Programs (nonbusa@bu.edu).
- Transfer credit must be taken at an accredited college.
- A minimum grade of C is required for a course to be eligible for transfer.
- Transfer courses will not satisfy Hub units.
- It is your responsibility to speak with your academic advisor to confirm how an approved transfer course will apply to your degree program.
- Courses receive no more than the number of credits earned at the host institution; a 3-credit course will transfer in as 3 credits, even if it has been equated to a 4-credit BU course. Credits earned from a trimester or quarter system will be recalculated to the credit equivalency of a semester system.
- A course taken outside of BU during the fall or spring semester while a student is also enrolled in BU courses is not eligible for transfer unless the course is through the consortium agreement.
- Upon completion of the course, an official transcript must be sent directly to CAS Advising to complete the transfer credit process: casadv@bu.edu or 100 Bay State Road, Room 401, Boston MA 02215

Step 2: To be completed by student. Please provide the information below and submit this form along with the course syllabus to the appropriate BU academic department.

Name: ___________________________ BU ID: ___________________________
CAS Major: ___________________________ Minor: ___________________________
BU Email: ___________________________ Expected Graduation Date: ___________________________
Proposed Institution: ___________________________
Proposed Course Number: ___________________________ Proposed Course Title: ___________________________

☐ Fall ☐ Winter ☐ Spring ☐ Summer Year: _______ Credits: _______ ☐ Semester ☐ Trimester ☐ Quarter

Proposed BU Course Equivalency: ___________________________
☐ I have read and understand the policies on transfer credits.
☐ I understand I must request an official transcript be sent to CAS Advising upon completion of this course.
☐ I have spoken to my academic advisor and am aware of how this transfer course would apply to my degree.

Signature: ___________________________ Date: ___________________________

Step 3: To be completed by academic department. Please complete the portion below and submit this form to CAS Advising (casadv@bu.edu).

BU Course Equivalent:
If a specific equivalency does not exist but can be approved for transfer credit, please award equivalency evaluation of 1**, 2**, 3**, etc.

☐ Check here if this course is not eligible for transfer.

Reviewed By: ___________________________ Title: ___________________________ Department: ___________________________
Signature: ___________________________ Date: ___________________________