

Registrar's Office BU School of Public Health Boston University | School of Public Health 715 Albany St, Talbot 210C| Boston, MA 02118 P 617-358-3434 E sphregr@bu.edu

TRANSFER CREDIT/WAIVER REQUEST FORM

Use this form to request transfer credit and/or a waiver for graduate-level coursework taken outside of BUSPH. SPH students may petition to have a maximum of 8 credits transferred to meet degree requirements. Dual degree students are not eligible for transfer credit. Courses cannot have been used or be used towards another degree program. SPH students may also petition to be waived from requirements based on previous coursework. Students must earn a B or better for transfer credit and/or waiver to be granted. Attach the syllabus of the course to this form. BUSPH maintains a list of courses that are pre-approved for MPH elective transfer credit, a list of those courses are on the next page—a syllabus is not necessary for pre-approved courses.

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ID Number	Last Name	First Name	Expected Grad Date (MM/YYYY)
Degree: MPH Funct Cert:		2 nd Cert:	

 \square MS \square PhD \square DrPH in Program

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Course #	Course Title	Institution	Semester & Year Taken	Grade*
*CDU De siete				
*SPH Registrar's Office will verify that the course grade is a B or better after an official transcript is received.				

Request type (select one):
MPH elective transfer credit
Transfer credit—program/certificate (list cert.)
AND waiver of the following requirement (list course/requirement area):
Waiver of the following requirement (list course/requirement area):
Transfer credit—program/certificate (list cert.)

Additional Information:

□ This course is pre-approved (see attached list)

I have spoken with the following advisor about this request

Justification/Comments:

□ I acknowledge that I have read and understood the transfer credit/wavier policy. I understand that requests without a syllabus will not be reviewed. I understand that I am responsible for sending an official transcript to the SPH Registrar's Office. 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	Reviewer	Date Sent:	

For Faculty Reviewer Use Only

□ Course not approved because:

□ Course approved as requested above

Signature:

Date:



BU School of Public Health

Courses Pre-approved for MPH Elective Credit

Course #	Title	Credits	Note		
	College of Communications				
<u>COM CM707</u>	Writing for Media Professionals	4	must do PH projects		
<u>COM J0702</u>	Advanced Science Writing	4	must do PH projects		
COM J0703	Magazine Writing	4	must do PH projects		
COM J0519	Narrative Radio	4	must do PH projects		
	College of Health and Rehabilitation Sciences	: Sargent Co	ollege		
<u>SAR HS551</u>	Human Nutrition Science	4	must take as graduate student		
<u>SAR HS776</u>	Nutritional Epidemiology	4			
<u>SAR OT713</u>	Developmental Disabilities	2	LEND fellowship		
	Division of Graduate Medical Scie	nces			
<u>GMS BC610</u>	Medical Consequences of Natural and Manmade Disasters	3			
<u>GMS CI640</u>	Regulatory and Compliance Issues	4			
<u>GMS CI675</u>	Designing Clinical Research Studies	4			
GMS MA622	Religion & Public Health	3			
<u>GMS MA700</u>	History and Theory of Medical Anthropology	3			
GMS MI713	Comprehensive Immunology	4			
GMS MS751	Cardiovascular Epidemiology	3			
	Graduate School of Arts & Scien	ces			
GRS SO890	Seminar: Global Health: Politics, Institutions & Ideology	4			
	Metropolitan College				
MET CS581	Electronic Health Records	4			
<u>MET ML720</u>	Food Policy and Food Systems	4			
<u>MET ML721</u>	US Food Policy	4			
	Questrom School of Business	;			
QST HM833	Health Sector Marketing	3			
QST HM840	Health Sector Consulting	3			
QST IM853	Indian Field Seminar	3			
QST OB830	Leading the Mission-Driven Organization	3			
<u>QST OB844</u>	Managing Organizational Change	3			
<u>QST OB848</u>	The Leadership Challenge	3			
<u>QST OM840</u>	Managing and Improving Quality: Six Sigma Belt Certification	3			
	School of Social Work				
SSW HB735	Racial Justice and Cultural Oppression	4			
	School of Theology				
<u>STH TR830</u>	Values and Practices in Developing Health Communities (Decent Care)	4			
Tufts University, Friedman School of Nutrition (*would need to cross register)					
NUTR 202*	Principles of Nutrition Science	3			
<u>NUTR 217</u> *	Monitoring & Evaluation for Nutrition & Food Security	3	cannot take this and SPH		
	Projects	A	GH745		
<u>NUTR 228</u> *	Community & PH Nutrition	4			