



**ARGOSY UNIVERSITY TO ADLER UNIVERSITY TRANSFER CREDIT AGREEMENT**

TOTAL CREDITS  
TRANSFERRED  
IN \_\_\_\_\_

TOTAL  
CREDITS LEFT  
REMAINING IN  
DEGREE  
PROGRAM \_\_\_\_\_

**PLEASE LIST THE COURSE SECTIONS FOR THE NEXT TERM BELOW (please include section letters: ex. ABC-123-A)**

**SIGNATURE PAGE**

Registrar: registrar@adler.edu

Financial Aid: financialaid@adler.edu

**Evaluator: send copy to Registrar and Financial Aid**

Evaluated and Approved By (type name): \_\_\_\_\_

Evaluated and Approved By (signature): \_\_\_\_\_

*My signature below confirms I am in agreement with the course work applied to my degree program. I also understand I am not eligible for transfer credit if my student loan(s) have been discharged for my Argosy University degree program.*

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_