SUNY Transfer Credits Student Appeal Form

Date: Name: Address: Contact #:	
SUNY	College Transferring From:
	Course Wanting to Transfer:
SUNY	College Transferring to:
	Course Wanting Credit or Placement For:
at a SU	ility: This process is for SUNY students who have been accepted or are currently enrolled JNY institution, and who do not agree with the campus decision regarding acceptance or nent of credit earned elsewhere at SUNY.
Along	with this cover sheet, the following information is required:
	a letter outlining the reasons for the appeal documentation of campus appeal application a transcript from the college transferring from a syllabus of the course the student has taken a syllabus of the course the student would like credit for (if available) a copy of the campus response form from the SUNY institution explaining why the course credit was not accepted.
Submi	t materials either by email or by certified mail:
	Via email: <u>studentmobility@suny.edu</u> (Please include this form and other materials as attachments.)
	Via certified mail:
	Dr. Tod Laursen Senior Vice Chancellor and Provost SUNY System Administration One University Plaza Albany, NY 12246