University of Winnipeg Graduate Studies

TRANSFER CREDIT FORM

Can don't Nameloon		Cturdent Names		
Student Number:		Student Name:		_
Institution where	Course(s) Taken: _			
Year Course(s) T	aken and Specific T	ERM:		
				_
TFR Course #	UW Course #	Course Title	Credit Value	Grade
	•	•	•	
APPROVED BY	:			
	(signature)			
DATE:				

22June12