

## 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](mailto: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](mailto: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](mailto: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: \_\_\_\_\_