College of Graduate and Professional Studies

MSMIS

REQUEST for WAIVER/TRANSFER CREDIT
FOUNDATION/CORE/CONCENTRATION COURSES

Effective 2007

Name: _____
Last First Middle Initial

In order for coursework completed at another institution to be considered equivalent to a CGPS course, it must meet the following criteria:

- Completed at an accredited college or university
- Completed prior to admission to UMW
- Had an equal or greater number of credits awarded (may combine two or more courses)
- Official transcript is submitted
- Content was equivalent to the CGPS course. *If possible, please provide a course description or syllabus.*
- ***Transfer Credit for graduate level course(s)*** must have been completed within the last ***6 years*** with a grade of "B" or higher
- ***Waiver for foundation level course(s)*** must have been completed within the last ***10 years*** with a grade of "B" or higher

Information for Foundation Course Waiver Request(s)

CGPS Foundation Courses	**Potential Equivalent Course(s)**			**OFFICIAL USE ONLY**	
EXAMPLE	Course #	Course Title	Completed at (Name of Institution)	Approval (Initials)	Reason for Denial
LRSP 331 Org. Behavior	*MGMT 3XX*	*Organizational Behavior*	*J. Smith Accredited College*	___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
BPST 316 Stats. For Mgrs				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
3 credits from the following:					
CIST 302 Visual Programming				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
CIST 303 Obj. Oriented App Bus				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
3 credits from the following:					
CIST 299 Info Sys Concepts & Ap				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
CIST 302 Visual Programming				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
CIST 303 Obj. Oriented App Bus				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
CIST 401 Database Sys				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
CIST 404 Bus. Data Comm				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
CIST 405 Comp. Networking				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
3 credits from the following:					
LRSP 311 The Mgt Process				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
LRSP 331 Org. Behavior				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
3 credits from the following:					
LRSP 306 Econ for Bus.				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
LRSP 412 Mkt for Mgrs				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
LRSP 435 Lrsp, Innov. & Creat.				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information

Information for Graduate Level Transfer Credit Request(s)

CGPS course to be reviewed for completion via Transfer Credit	**Potential Equivalent Course(s)**			**OFFICIAL USE ONLY**	
	Course #	Course Title	Completed at (Name of Institution)	Approval (Initials)	Reason for Denial
				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information
				___Yes ___No	____Grade ____Age ____Content ____Need Additional Information

Student Signature: _____ Date: _____

PROGRAM USE ONLY

_____ _____ _____ _____
Program Director **Date** **Office of Advising** **Date**

COMMENTS: