# COURSE TRANSFER AND WAIVER REQUEST

*All transfer, waiver, and unit reduction requests MUST be received in a student's **first quarter** of attendance at UCR*
Please **DO NOT** contact the instructor directly about having course transferred and waived approved

Name _____     Student ID _____

Entry Term (qtr/yr) _____     Degree objective     PhD     MS     Faculty advisor if applicable _____

Unofficial transcript(s), syllabus for each non-UCR course and program plan must be submitted with this form. Syllabi are reviewed by the CSE faculty to determine if the request for transfer and waiver of courses can be approved.

Based on the Program Plan, indicated your major Specialty Area from A to H *(must provide)* _____

**Transfer** – Up to 8 units completed in <u>graduate</u> standing with grade B or above may be requested to be transferred from a university outside the University of California system.  Courses used to complete a degree (bachelor, master, PhD) cannot be transferred. *This transferability rule applies to UCR courses taken at University Extension via concurrent enrollment.*

Name of university _____

Degree attempted     Master     PhD     Other, specify degree _____

| UCR course | Outside course | Reviewer | Equivalency approval *(office use)* | Applicable Area (A-H) |
|---|---|---|---|---|
| *Example: CS 254 Network Security* | *CSCE 715 Network Systems Security* | *Zhiyun Qian* | | *Depth* |
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**Waiver** - Up to five courses (20 units) may be waived. Courses need to be equivalent and/or relevant in content to courses offered in the Computer Science Department at UCR or relevant to the degree in Computer Science.   Waiver Course Work petition needs to be submitted after the request is approved.  Complete a second form if requesting over 6 courses to be waived.

Name of university _____

Degree received     Master     PhD     Date degree awarded _____

| UCR course | Outside course | Reviewer | Equivalency approval *(office use)* | Applicable Area (A-H) |
|---|---|---|---|---|
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Are you requesting unit reduction of course requirements if your request is approved?     Yes     No

Why are the waiver and/or transfer of courses necessary? _____

_____

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**DEPARTMENT APPROVALS** *(office use only)*

   Number of approved **transfer** course(s) _____     Number of approved **waiver** course(s) _____

   Request to reduce unit toward degree requirement     Approved _____     Denied _____

Graduate Advisor's signature _____     Date _____