

TRANSFER CREDIT REASSESSMENT FORM

INSTRUCTIONS: Review reassessment information here.

Visit www.torontomu.ca/transfer-credits for more information.

Using your **Toronto Metropolitan University (TMU) email**, please submit each reassessment package as one PDF attachment to tcredits@torontomu.ca with the subject line, "Transfer Credit Reassessment for 'TMU course code, student ID'" (e.g. Transfer Credit Reassessment for ABC100, 500123456).

To be completed by the student PLEASE FILL OUT FORM ACCURATELY AND COMPLETELY.			
STUDENT ID			
TMU PROGRAM			
FIRST NAME			
LAST NAME			
EXTERNAL COURSE INFORMATION:			
PREVIOUS EDUCATIONAL INSTITUTION	COURSE CODE	COURSE TITLE	
TMU EQUIVALENT COURSE:			
Please indicate the reason for this reassessment, outl	ining the similarities in course c o	ontent and level:	

By e-mailing this reassessment form, I affirm that this application and any accompanying documents are accurate and accept that I may be subject to a Transfer Credit Late Fee.