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CREDIT TRANSFER REQUEST FORM

INSTRUCTIONS:

- Use BLOCK LETTERS throughout. Affix one 1"x 1" size attested photograph in given space.
- Please fill all parts of the application form. Incomplete application will not be entertained.

PERSONAL INFORMATION

Applicant's Name: Mr./Ms.	
Cell #	Email
Mailing Address	
Permanent Address (if different from the mailing address)	

DEGREE APPLIED FOR

School of Informatics and Robotics (SIR)

- a. Bachelor in Information Technology
- b. Bachelor in Software Engineering
- c. Bachelor in Computer Science

School of Art (SOA)

- a. Bachelor in Fine Arts
- b. Bachelor in Graphic Design
- c. Bachelor in Textile Design
- d. Bachelor in Fashion Design

School of Digital and Cinematic Art (SDCA)

- a. Bachelor in Animation Design
- b. Bachelor in Game Design and Development
- c. Bachelor in Film and TV

School of Architecture, Design, & Urbanism (SADU)

- a. Bachelor in Architecture
- b. Bachelor in Interior Design
- c. Bachelor in Landscape Architecture
- d. Bachelor in Construction Management

CURRENT ACADEMIC INFORMATION

Name of the Institute	Year of Admission
Academic Program	
Current Semester	Total Completed Semester
Number of courses completed	Credits
Last Semester GPA	CGPA

ATTACHED THE FOLLOWING ATTESTED DOCUMENTS:

- Provisional transcripts of the semesters (duly signed by controller examination)
- Course outline/Road map of the last institution/program (duly verified by previous Institute)
- N.O.C/Migration Certificate (from last Institution/University)

DECLARATION BY THE APPLICANT

The information filled in the application for admission are true and complete to the best of my knowledge and I shall be responsible for any misstatement therein.

Applicant's Signature.....

Date.....

COURSES COMPLETED

SEMESTER I

Start date:

End date:

Course Title	Course completion status YES/ NO	Course Credits	GPA obtained

Overall CGPA of the Semester

SEMESTER II

Start date:

End date:

Course Title	Course completion status YES/ NO	Course Credits	GPA obtained

Overall CGPA of the Semester

SEMESTER III**Start date:****End date:**

Course Title	Course completion status YES/ NO	Course Credits	GPA obtained

Overall CGPA of the Semester

SEMESTER IV**Start date:****End date:**

Course Title	Course completion status YES/ NO	Course Credits	GPA obtained

Overall CGPA of the Semester

SEMESTER V**Start date:****End date:**

Course Title	Course completion status YES/ NO	Course Credits	GPA obtained

Overall CGPA of the Semester **SEMESTER VI****Start date:****End date:**

Course Title	Course completion status YES/ NO	Course Credits	GPA obtained

Overall CGPA of the Semester

SEMESTER VII**Start date:****End date:**

Course Title	Course completion status YES/ NO	Course Credits	GPA obtained

Overall CGPA of the Semester

SEMESTER VIII**Start date:****End date:**

Course Title	Course completion status YES/ NO	Course Credits	GPA obtained

Overall CGPA of the Semester