

SUNY Institute of Technology

Program of Study/Transfer Credit Revision Form

Student: _____ SUNY ID: _____ Major: _____

Degree: _____

Please indicate if you wish to **ADD** credits or **DELETE** previously entered credits in a category. Be sure to indicate the name of the transfer college involved.

College	Add or Delete	Transfer Course Name & Number	Course Name & Number	Credits
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____
9. _____	_____	_____	_____	_____
10. _____	_____	_____	_____	_____

Total transfer credits for each college, including revisions above:

Please indicate upper division credit.

College: _____ Credits: _____

College: _____ Credits: _____

College: _____ Credits: _____

College: _____ Credits: _____

College: _____ Credits: _____

College: _____ Credits: _____

Totals: _____

Upper Division: _____

Lower Division: _____

Date: _____ Evaluator: _____

Entered on BANNER _____ by _____

(date) (initials)