Missouri Western State University
Recommendation for Change from Established Transfer Course Equivalent
(including AP and IB)

Use this form for changes to individual transfer course equivalents. If there are a large number of
courses in association with program to program updates, one form, including appropriate signatures,
may be attached to supporting documentation.

Date: Click here to enter text.

MWSU Course: Click here to enter text.

MWSU Course Description: Click here to enter text.

Transfer Institution: Click here to enter text.

Transfer Institution Course: Click here to enter text.

Transfer Institution Course Description: Click here to enter text.

☐ Course should now be accepted ☐ Course should no longer be accepted

Reason and/or supporting evidence for the course change indicated above: Click here to enter text.

Notes:
- Change request received before October 1st and which restrict equivalency assignments will be
effective the following Fall semester.
- Change requests received after October 1st and which restrict equivalency assignments will be
effective in two Fall semesters.
- Change request which expand equivalency assignments will be effective the next semester which
has yet to have transfer equivalencies processed.

Department Chairperson ____________________________ Date ______________________
(department which houses the course(s))

College or School Dean ____________________________ Date ______________________

Provost’s Office ____________________________ Date ______________________

For Registrar’s Office Use Only

Term change is effective ______________________

Admissions Office Notified ______________ Transfer Institution Notified ______________
Banner Updated ______________ Webpage Updated ______________