



INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA

**APPLICATION FOR TRANSFER OF CREDIT  
 (FROM OTHER UNIVERSITIES/COLLEGES)**

**CRITERIA FOR TRANSFER OF CREDIT**

<p>1. The courses obtained a minimum grade of C or equivalent.</p> <p>2. The courses are from an accredited programme.</p> <p><b>Please submit the following supporting document together with this form:</b></p> <p>1. Transcript/result slips (showing all the course titles and grades).</p> <p>2. Course outline/syllabus/description/curricular of all courses.</p>	<p><b>For Office Use Only:</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;"><b>CHECKLIST: (OFFICE USE)</b> <b>*Please (√) which is applicable</b></td> <td style="width: 50px; text-align: center; vertical-align: middle;">/</td> </tr> <tr> <td style="padding: 5px;">1. Transcript/result slips</td> <td style="width: 50px;"></td> </tr> <tr> <td style="padding: 5px;">2. Course outline/syllabus</td> <td style="width: 50px;"></td> </tr> </table>	<b>CHECKLIST: (OFFICE USE)</b> <b>*Please (√) which is applicable</b>	/	1. Transcript/result slips		2. Course outline/syllabus	
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1. Transcript/result slips							
2. Course outline/syllabus							

**PART A, B & C: TO BE FILLED IN BY THE APPLICANT**

**PART A: PERSONAL DETAILS OF STUDENT**

Name : .....

Matric No : .....

Programme : .....

Kulliyyah : .....

Email : .....

Tel / Hp No : .....

Address : .....

**PART B: INFORMATION ON PREVIOUS INSTITUTION**

- 1. Name of Institutions : .....
- 2. Name of Programme : .....  
(eg: Degree, Diploma, etc)
- 3. Year of study : .....
- 4. CGPA : .....

**PART C: LIST OF COURSES TO BE CONSIDERED FOR CREDIT TRANSFER**  
(Please attach ALL copies of the relevant course outlines/syllabus/description)

No	Course Code (as stated in the applicant's transcript)	Course Title (as stated in the applicant's transcript)	Credit Hours	Grade Obtained	Course Code (as offered by IIUM)	Course Title (as offered by IIUM)

I certify that the above and attached information is **TRUE**

Applicant's Signature : .....

Name : .....

Date : .....

**For Office Use Only:**

<p><b>Recommended by:</b></p> <p>.....</p> <p>Deputy Dean (Academic Affairs &amp; Industrial Linkages)</p> <p>Official Stamp:</p> <p>Date : .....</p>	<p><b>Approved by:</b></p> <p>.....</p> <p>Dean</p> <p>Official Stamp:</p> <p>Date : .....</p>
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**NOTE: Incomplete application will not be entertained**