



BUFFALO STATE
The State University of New York

Transfer Credit Appeal Process

Students transferring credit to Buffalo State must submit an official transcript from the institution where they earned the credit to the Buffalo State Admissions Office. Admissions will complete a transfer credit evaluation in accordance with academic regulations and after consulting with relevant academic departments.

Students may appeal the decision to deny transfer credit or request credit for a course other than what was awarded by following these steps:

- ☐ Complete the student fields on the Transfer Credit Appeal Form
- ☐ Attach supporting documentation as outlined on the Transfer Credit Appeal Form
- ☐ Submit the form and documentation to the chair of the relevant academic department

Once the documentation is reviewed by the department, the department chair will notify the student of their decision and return the form to Admissions (contact information below). Admissions will make changes to the transfer credit awarded if necessary.

If an appeal is denied, the department chair will provide the student with information and necessary documents to appeal the decision to the SUNY Office of the Provost.

Transfer Credit Appeal Contact:

Nicholas Insalaco

Articulation & Transfer Advisor

insalanm@buffalostate.edu

716-878-5910

Transfer Admissions

transfer@buffalostate.edu



BUFFALO STATE
The State University of New York

Transfer Credit Appeal Form

Date: _____ Banner ID: _____

Student Name: _____

Buffalo State Email Address: _____

Transfer course you are appealing:

Course Title (i.e. College Writing): _____

Course prefix & number (i.e. ENG101): _____

Transfer Institution (i.e. Canisius College): _____

***Along with this form, please attach an official catalog description of the course and/or a copy of the syllabus for the course you are wishing to transfer. You may also submit a letter outlining the reasons for the appeal, including how and why the course should transfer as the course you are requesting.**

Submit materials to the academic department chair for the transfer course in question.

DEPARTMENT CHAIR MUST SIGN AND DATE THIS FORM

Chair or designee (please print): _____

Department: _____ Date received: _____

☐ **ACCEPTED*** as equivalent to Buffalo State course: _____

☐ **For this student only**

☐ **For all students**

▪ **Effective Fall 20**____

☐ **DENIED**

Signature of Chair or designee: _____ Date of Decision: _____

Approval by the chair is subject to verification by Admissions that the course is eligible for acceptance at SUNY Buffalo State.

Once a decision has been made, please notify student return this form to Moot Hall 110 or scan and email to transfer@buffalostate.edu.

FOR OFFICE USE ONLY:

Date entered: _____ Initials: _____ CEEB Code: _____

☐ Entered into Slate