

# Application for Credit Transfer

## External Credits

Please submit to [aco@modul.ac.at](mailto:aco@modul.ac.at).



Course and examination credits obtained at an external institution (including, Austrian vocational high schools with a business or hospitality focus, universities, colleges, or any other higher education institutions) may be eligible for credit transfer according to an equivalency evaluation based on a review of course contents, outline, methods, and final grade. Practical experience acquired by the student prior to enrollment may be credited towards an internship when in accordance with the respective study regulations and the requirements outlined in the Internship Manual. **Please note:** This form shall not be used by students from Global Campuses of MU.

For details regarding the **credit transfer process, deadlines and eligibility**, please review the **Q&A section** on our website at <http://www.modul.ac.at/transferecredits>, and § 1 of MU's Examination Regulations and Student Code of Conduct.

### PLEASE COMPLETE STEPS 1-5 IN ORDER TO APPLY FOR CREDIT TRANSFER

#### Step 1: Please Provide your Personal Information:

|                |                      |            |                      |                         |                      |
|----------------|----------------------|------------|----------------------|-------------------------|----------------------|
| First Name:    | <input type="text"/> | Last Name: | <input type="text"/> | Student ID #:           | <input type="text"/> |
| Study Program: | <input type="text"/> |            |                      | Semester of Enrollment: | <input type="text"/> |
| Email Address: | <input type="text"/> |            |                      |                         |                      |

#### Step 2: Please Indicate the Purpose of your Application:

- Credit Transfer for Academic Courses
- Credit Transfer for Practical Experience (900 hrs / 30 ECTS)
- Credit Transfer for Practical Experience (450 hrs / 14 ECTS)

#### Step 3: By ticking a box, I confirm that the required documents supporting my application are submitted along with this application (as one pdf file):

- A) Credit Transfer for Academic Courses
- Academic Transcript(s) of record, listing all courses credit transfer is requested for;
- Course Syllabi, i.e. descriptions referring to the course title, weekly hours, course type, ECTS and expected learning outcomes for the respective course (not required for applicants from Austrian vocational schools);
- B) Credit Transfer for Practical Experience
- Work Certificate or Reference Letter from your employer, confirming where you worked, your duties and time period of work;
- Internship Report, as outlined in the Internship Manual;
- Project Report, as outlined in the Internship Manual (ONLY for applicants seeking credit transfer for the 900 hrs internship);

**Step 4:** By signing this form, I confirm that I have read and understood MU's Guidelines on Credit Transfers as outlined on the MU website, the Internship Manual and MU's Examination Regulations and Student Code of Conduct. I hereby confirm that all information provided is accurate and true, and that I am submitting this application prior to the end of the deadline. I understand that my request is subject to approval by the Dean of the study program.

|                     |                      |                 |                      |
|---------------------|----------------------|-----------------|----------------------|
| Applicant Signature | <input type="text"/> | Date of Request | <input type="text"/> |
|---------------------|----------------------|-----------------|----------------------|

#### Step 5: Please proceed to the next page, and indicate all courses and/ or practical experience you seek credit transfer for.

| SECTION TO BE COMPLETED BY THE APPLICANT             |  |               |             |                    |      |  | SECTION FOR OFFICE USE |  |
|--|--|---------------|-------------|--------------------|------|--|------------------------|--|
| Course Title at other (higher) Education institution | Name of other (higher) Education institution | ECTS/ Credits | Final Grade | Course Title at MU | ECTS | Credit Transfer Approved                                 | Fee Reduction          |  |
|  |  |               |             |                    |      | <input type="checkbox"/> yes <input type="checkbox"/> no |                        |  |
|  |  |               |             |                    |      | <input type="checkbox"/> yes <input type="checkbox"/> no |                        |  |
|  |  |               |             |                    |      | <input type="checkbox"/> yes <input type="checkbox"/> no |                        |  |
|  |  |               |             |                    |      | <input type="checkbox"/> yes <input type="checkbox"/> no |                        |  |
|  |  |               |             |                    |      | <input type="checkbox"/> yes <input type="checkbox"/> no |                        |  |
|  |  |               |             |                    |      | <input type="checkbox"/> yes <input type="checkbox"/> no |                        |  |
|  |  |               |             |                    |      | <input type="checkbox"/> yes <input type="checkbox"/> no |                        |  |
|  |  |               |             |                    |      | <input type="checkbox"/> yes <input type="checkbox"/> no |                        |  |

|                |                      |                  |                      |      |                      |           |                      |
|----------------|----------------------|------------------|----------------------|------|----------------------|-----------|----------------------|
| Signature Dean | <input type="text"/> | Date of Decision | <input type="text"/> | ECTS | <input type="text"/> | Reduction | <input type="text"/> |
|----------------|----------------------|------------------|----------------------|------|----------------------|-----------|----------------------|

| Internship: Job Title | Internship: Name and Address of Company | Date FROM | Date TO | Total Contract Hours | Total Hours Worked | Credit Transfer Approved                                 |
|-----------------------|---|-----------|---------|----------------------|--------------------|--|
|                       |   |           |         |                      |                    | <input type="checkbox"/> yes <input type="checkbox"/> no |
|                       |   |           |         |                      |                    | <input type="checkbox"/> yes <input type="checkbox"/> no |

|   |                      |                  |                      |            |                      |
|---|----------------------|------------------|----------------------|------------|----------------------|
| Signature Dean / Internship Coordinator | <input type="text"/> | Date of Decision | <input type="text"/> | ECTS       | <input type="text"/> |
|   |                      |                  |                      | Total ECTS | <input type="text"/> |