

YORK



UNIVERSITÉ
UNIVERSITY

FACULTY OF HEALTH

School of Nursing

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**Request for BScN Transfer Credit Assessment
(Form to be used for any university studies beside York University
Seneca College or Georgian College)**

If you have completed post-secondary (university) studies prior to being admitted to the Collaborative Nursing Program, other than at York University, that you feel are equivalent to upper-level (3rd or 4th year) BScN degree requirements please complete this form and send it to:

Admissions Office, Transfer Credit – 3rd Floor, Bennett Centre for Student Services, York University, 4700 Keele Street, Toronto, ON. M3J 1P3

SUBMISSION DEADLINE: May 31

First Name: _____

Last Name: _____

York Student Number: _____

Note:

- In addition to submitting this form, you must arrange for an official transcript to be sent directly from the institution where you completed your prior post-secondary studies directly to the York Admissions Office (see address above). The transcript must be sent directly from the institution to York for it to be considered official.
- Course descriptions are required from your previous university studies
- Courses completed at York University prior to joining the Collaborative Nursing Program will be automatically considered for credit towards the BScN. No York University transcript is required.
- Do not submit this form if you have only attended the Collaborative Nursing program at Seneca or Georgian College or York University.

Signed: _____ Date: _____

