Application for credit transfer

*Last name, first name, civic number*

*Application refers to courses from “University, Country”*

*Time period e.g. Autumn 2019 or Autumn 2019 – Spring 2020*

### Date of arrival:

### Document number:

## CREDIT TRANSFER

 I am accepted to the following program at Lund University:

*Master´s Program in Biology/Molecular Biology/Bioinformatics*

I hereby apply for a credit transfer for the following courses:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Course code | Name | Local credits | HP Credits | Educ.Level\* |
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*\*Education level: Bachelor´s (B) or Master´s (M) level*

Decision

 Application approved Application rejected

 *(motivation enclosed)*

Date

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Lotta Persmark/Christina Ledje, PhD Jep Agrell

Study Coordinator Director of Studies