



COMMUNITY COLLEGE
OF RHODE ISLAND

Reverse Transfer Application

Overview: Students who attend the Community College of Rhode Island, Rhode Island College, and/or the University of Rhode Island may qualify for the conferral of the associate degree or certificate from the Community College of Rhode Island through the reverse transfer policy if the following conditions are met:

Eligibility to participate:

1. The student eligible for conferral of the associate degree through reverse transfer have earned cumulatively, a minimum of 60 college-level credits combined from CCRI, RIC, and/or URI.
2. The student has not earned an associate or bachelor's degree.
3. Student has a GPA greater than or equal to 2.0 (at time of graduation).
4. Student has resolved any financial issues at the sending or receiving institution.
5. Students agree to the exchange of educational data request in compliance with Family Educational Rights and Privacy Act (FERPA) regulations.

Eligibility for Associate Degree or Certificate

1. The student has completed (or will complete) a minimum of 15 college-level credits at CCRI (or one-fourth of the number of credits required for the associate degree or certificate).
2. The specific degree and graduation requirements of CCRI must be met for the associate degree or certificate to be awarded.
3. Students who have completed graduation requirements at CCRI once the courses are transferred back from the college or university will have the degree or certificate awarded after the transcripts have been evaluated.
4. Students who have a grievance regarding the awarding of a degree through reverse transfer will follow the procedure identified in the section on Students Rights and Responsibilities in the Council on Postsecondary Education's policy on Articulation and Transfer.

Application Instructions: To participate in the Reverse Transfer Program the following steps in the application process must be completed:

1. Apply using the Reverse Transfer Application.
2. Select a Reverse Transfer Major:

Associate Degree Options:

Accounting, General Business, General Studies, Liberal Arts (optional concentrations available in English, Foreign Language, or Mathematics), or Science

Certificate Options:

Accounting, Entrepreneurship, Financial Services, Management, Marketing

3. Return the Reverse Transfer Application along with your official transcripts from previous schools attended (official copies must be in sealed envelopes from sending institutions) to:
CCRI, Records Department, Attn. Reverse Transfer, 1762 Louisquisset Pike, Lincoln, RI 02865.
4. Documents will be reviewed for program eligibility.
5. Student will be notified through the mail if they qualify for the Reverse Transfer program. Students not eligible may still be eligible for general transfer and will be notified of their status.
6. Students needing to complete additional coursework will be encouraged to meet with an academic advisor to develop an educational plan to complete program requirements.
7. Questions regarding the program can be sent to Reversetransfer@ccri.edu or you may call 401-333-7092.



Reverse Transfer Application

Personal data: Complete this form after you have reviewed the Reverse Transfer program listings. Please print clearly.

Date of application

Social Security number

Social Security number is mandatory under federal law.

Name as it appears on Social Security card or U.S. passport

Last name

First name

Middle initial

Date of birth (mm/dd/yy)

Previous/Maiden Name

Last name

First name

Middle initial

Gender: Male
 Female

Permanent home street address

City

State

ZIP

Home telephone number

Cell number

E-mail address

Have you lived continuously in Rhode Island for one or more years as of the date of this application? Yes NoAre you a U.S. citizen? Yes NoIf you are not a U.S. citizen, do you have a Permanent Resident Card (Green Card)? Yes No

If you are a permanent resident card holder, please provide your alien registration number.: _____

Is Rhode Island your legal and permanent state of residence? Yes NoIf you have a non-Rhode Island permanent home address and you are claiming Rhode Island residency, you must submit a CCRI Application for In-State Residency and all required documentation. This information is available at www.ccri.edu/oes/Forms/ResidencyAppealLetter.pdf

If you are not a legal and permanent resident of Rhode Island, please list your legal residence.

Street _____ City _____ State _____ ZIP _____ Country _____

Service members or dependentsDid you serve or are you serving in the U.S. armed forces? Yes No N/AIf you or your dependents are currently serving, are you stationed in Rhode Island on active duty? Yes No N/AWill you be using VA education benefits at CCRI? Yes No N/AWill you be using VA education benefits as a dependent at CCRI? Yes No N/ADid you honorably serve in a combat zone? Yes No N/A**Please note:**

- Applicants in Refugee Status, Temporary Protected Status, or Political Asylum Status must mail a copy of the documentation of their status.
- Other visa or immigration status: Please mail a copy of your Visa, I-797 or other documentation.

Misrepresentation concerning residency and/or citizenship is grounds for immediate dismissal from the college, but you will remain liable for all tuition and fees.

The following information helps us comply with federal statistical reporting requirements only and will not, in any way, impact an admission decision on your application. Federal regulations require colleges to report enrollment data by racial, ethnic and gender categories.

Ethnicity: (Not used for admission. Please check one.)*

-
- Not Hispanic
-
-
- Hispanic or Latino

Federal regulations require colleges to report enrollment data by racial, ethnic and gender categories

Race: (Not used for admission. You may check more than one race.)

-
- American Indian or Native American
-
-
- Asian
-
-
- Black or African American
-
-
- Native Hawaiian or Pacific Islander
-
-
- White

Important information: One or both parents (biological or adoptive) earned a four-year degree Yes No
 Single parent with custody of a child under 18 Yes No
 Speaker of English as a second language Yes No
 Displaced homemaker† Yes No

* Ethnicity/Race data reporting for federal purposes has changed. The selections that you see in this section are the choices as mandated by the federal government for higher education reporting purposes. Only statistical numbers are reported. No individual data appears on the federal reports.

† The term displaced homemaker refers to women or men who have worked mainly in the home for a minimum of two years caring for home and family. Due to loss of family financial support (usually through death, disability or divorce), these individuals must leave the home and seek to support themselves and their families.

Programs of interest: Please indicate your program interest.

I am interested in the following Reverse Transfer major at CCRI (check only one option)

Associate Degree Options:

___ Accounting ___ General Business ___ General Studies ___ Science
___ Liberal Arts (Liberal Arts concentration options: ___ None ___ English ___ Foreign Language ___ Mathematics)

Certificate Options:

___ Accounting ___ Entrepreneurship ___ Financial Services ___ Management ___ Marketing

High school history: Please complete as appropriate. Please print clearly.

I have or will have:

- High school diploma
- _____ Diploma Date
Institution name, city, state Code Month / Day / Year
- GED® credential
- _____ Date Received
State in which GED® credential was received Code Month / Day / Year
- Home school diploma — *Please submit documentation from your local school district approving your home schooling program.*
- _____ Date Received
Institution name, city, state Code Month / Day / Year
- I do not hold any of the above.

College history: Please list ALL undergraduate colleges and universities attended. (Please submit official transcripts from each school to: CCRI, Records Department, Attn. Reverse Transfer, 1762 Louisquisset Pike, Lincoln, RI 02865.) Please print

Do you have a bachelor's degree from a U.S. college or its equivalent from a school in another country? Yes No

If yes, indicate the degree received below.

COLLEGE 1: _____
College/University name Code City State Degree

COLLEGE 2: _____
Code City State Degree

COLLEGE 3: _____
College/University name Code City State Degree

Agreements:

I certify that the information that I have provided on the application is true and correct. Further, by signing this form, I agree to abide by the rules and regulations and fulfill all financial obligations to, the Community College of Rhode Island.

Additionally, I understand the requirements to participate in the reverse transfer program. I agree to the exchange of educational data requests in compliance with FERPA regulations.

Students' Signature: _____ Date: _____

For Office Use Only

Application received at FL Campus: _____ REVAP Code added: _____

Transcript received at FL Campus:

School: _____ Date: _____ SGASTDN: _____

School: _____ Date: _____

School: _____ Date: _____

Student eligible for reverse transfer ___ Yes ___ No Code: _____ {If No, eligible for general transfer ___ Yes ___ No}

Credits posted: _____

Student notified: _____

Additional notes: _____

Please return the Reverse Transfer Application and official transcripts to:

Community College of Rhode Island
Records Department
Attn. Reverse Transfer
1762 Louisquisset Pike
Lincoln, RI 02865