MANHATTAN TECH
MANHATTAN AREA TECHNICAL COLLEGE

Transfer/Articulation Credit for Technical Education

Student Name: _____ _____ ____ EX ID: _____
Last First MI

Program: _____ Entry Date: _____

Institution	Course No./Name	Credit Hours	Date Completed	MATC Course No./Name	Credit Hours

Department Name: _____

Instructor's Signature _____ Date _____

Office Use Only: Date Received _____ EX Entry _____

February 2016