



Evaluation of Transfer Credit Request

Last Name _____ **First Name** _____
Student ID _____ **Other Name** _____
Email _____ **Phone** _____

Enrollment Status:

New Student Continuing Student Returning Student Change of Program
 Spring _____ Summer _____ Fall _____

Program (you must be declared in a program in order to be eligible to have transfer coursework reviewed)

Adult High School Associate of Science Associate of Arts Certificate

Major: _____
(Specify program of study – Computer Science, Accounting, etc.)

List transcripts which will be received from the following schools, list additional schools on the back of the page:

	Adm & Reg Only
1. _____	Rcvd: _____
2. _____	Rcvd: _____
3. _____	Rcvd: _____
4. _____	Rcvd: _____

I understand that Admissions & Registration Office should have received my official transcript(s) and college catalog with course descriptions directly from the following schools listed above if requested. Foreign/International transcripts will only be evaluated if a valid NACES evaluation is also received. I understand that upon receipt of this form, only official transcripts received prior or with this form will be evaluated. If transcripts are received after the initial review, an additional request will need to be made.

Student Signature: _____ **Date:** _____

Admissions & Registration: Attach completed evaluation