Transfer Credit Evaluation

Catalog Term: 202310

Date:

Student ID:

Curriculum:

Credential:

Student Name:

Street Address:

City, State, Zip:

COLLEGE CODE (CC)

No.	Institution Name
1	
2	
3	

Transferred From (see College Code)					Courses Transferred/Credits Awarded		
CC	Course #	Course Title	GR	CR	Course #	Course Title	CR

Comments:

Evaluated by:

Date:

Entered by:

Date:

Name:

Transfer Credit Evaluation

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Transferred From (see College Code)					Courses Transferred/Credits Awarded		
CC	Course #	Course Title	GR	CR	Course #	Course Title	CR