

ADMISSIONS & RECORDS

REQUEST FOR EVALUATION OF TRANSCRIPTS

I request my transcripts to be evaluated and posted to my COC transcript.

Name: _____ Date: _____

Address: _____ ID#: _____

_____ Phone: _____

Former Name(s): _____

Have you applied for Financial Aid? _____ Yes _____ No

Others Reason(s) for Evaluation: _____

In most cases, units accepted from other institutions will not be posted on COC academic transcripts until students have completed 12 units in residence.

Your Academic Program is: _____ Catalog Year _____
See reverse side for codes.

You must list all colleges attended:

This form cannot be accepted until *all official transcripts* are attached or on file at COC.

Student Signature: _____

Received By: _____ Date: _____