

High School College Course Evaluation Request Form

CUA ID #: _____

EMAIL: _____

NAME: _____ CUA SCHOOL: _____

MAJOR: _____ UG ADVISOR: _____

INSTRUCTIONS:	<ul style="list-style-type: none"> • Submit 1 form for each University you received credit at to cua-transfercredit@cua.edu or (McMahon B10) for initial review. • Official transcript must be sent to: Transfer Coordinator B10, McMahon Hall 620 Michigan Ave., N.E Washington, DC 20064 • If a course syllabus is needed for evaluation, the Transfer Coordinator will notify you via email. It is the student's responsibility to contact the High School or University to request a copy of the syllabus. • The Transfer Coordinator will notify you when your course evaluation is complete. Consult your UG Advisor with Questions.
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College/University that Issued Credit: _____ Transcript sent (Y/N): _____

College Course Number (i.e. SOC 101)	College Course Title (i.e. Intro to Sociology)	College Credits (i.e. 3)		(OFFICE USE ONLY) CUA Equivalent	Fulfills Which Degree Requirement (Major, Minor, Distribution, Free Elective, Excess)

Transfer Coordinator Signature

Date

Undergraduate Advisor

Date