

REQUEST TO RE-EVALUATE TRANSFER COURSE

This form is used to appeal the evaluation of a course transferred to Colorado Mountain College.

Students who wish to appeal the transferability of coursework must work with their Counselor/Advisor within 12 months of Colorado Mountain College completing the transfer evaluation. One form should be submitted per course. The form is submitted by the Counselor/Advisor.

A full course syllabus from when the course was taken is mandatory with this request.

Once received, the Registrar's office re-evaluates the course based on the additional information. If required, the Registrar's Office may consult with the appropriate Department Dean and Faculty.

Student	Information:								
First Na	nmeMiddle N		Name]		Last Name				
Student	ID:								
Program			_ Catalog y	ear					
Has student petitioned to Graduate? Yes			No Anticipated graduation semester						
Transfe	r Course Informati	on:							
Transfer Institution									
Code	Tr	ansfer Cou	rse Title		QTR/SEM Hours	Grade	Term		
Attach course syllabus from the year course was taken.									
CMC course for which credit is sought:									
CMC Course Code and Title									
Reason for petition for re-evaluation:									
Counselo	or Signature			Date					



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Credential Evaluator Review							
How course originally transferred:							
Course request approved?	Yes	Need Dean/Department Review					
Comments							
Dean Review							
Name of Dean							
Comments							
Approval							
Yes - course equivalent as requested							
No – course is instead e	No – course is instead equivalent to						
No equivalent course re	No equivalent course remains as transfer level elective						

Depending on approval outcome counselor can then submit a course sub request and must include a copy of this document and the syllabus.

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