

*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 complete this form within 12 months of Colorado Mountain College completing the transfer evaluation.

**A full course syllabus from when the course was taken is mandatory with this request.**  
Once completed this form should be submitted to [registrar@coloradomtn.edu](mailto:registrar@coloradomtn.edu) along with all supporting documents.

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:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ Student ID \_\_\_\_\_

**Transfer Course Information:**

Transfer Institution \_\_\_\_\_

Code	Transfer Course Title	QTR/SEM Hours	Grade	Term	CMC Equivalent Code & Title	Sem. Hours

I have attached the course syllabus from the year I took the course(s) (required).

**CMC course for which I am seeking credit:**

**CMC Course Code and Title**

--

Reason for my petition for re-evaluation:

---

---

---

Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY**

Approved by Registrar's Office – Course re-evaluated and updated on student's record.

**Dean review required:**

Name of Dean \_\_\_\_\_

Approved per Dean review - Course re-evaluated and updated on student's record.

Denied per Dean review.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Etrieve