



# Transfer Work Evaluation Request

EMAILED FORMS MUST BE SUBMITTED WITH YOUR MJC STUDENT EMAIL, OTHERWISE THEY WILL NOT BE PROCESSED.

Submit completed form by email to [mjcevaluations@mjc.edu](mailto:mjcevaluations@mjc.edu) or by mail

## General Evaluation Process:

- **Official transcripts must be on file and you must be enrolled in courses at MJC before the evaluations process begins.**
- MJC only evaluates transcripts from Regionally accredited colleges. (Foreign Transcripts must be submitted to an independent evaluation agency for U.S. equivalencies and then submitted to our Enrollment Services Office.)
- Transcripts from out-of-state, private colleges, or coursework that is older than 10 years, may require additional course information.
- All courses posted to your academic record are irreversible.

**Prerequisite Clearance:** Please allow 2 business days for processing upon submission of this form. Prerequisites must be **completed** with a grade of "C-" or better. An approved clearance request does not guarantee space in any course.

**Full Transcript Evaluation:** There is a 4-6 week processing time upon submission of this form.

**Todays Date:** \_\_\_\_\_

## Student Information (Please list your legal name):

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Student ID: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Previous Name(s) Used on Academic Records (if any): \_\_\_\_\_

## Check box(s) that apply:

List all colleges to be evaluated: \_\_\_\_\_

What is your major at MJC? \_\_\_\_\_

- I would like a full evaluation of my transcript.
- I will be applying to the MJC Nursing program.
- I need prerequisites posted to clear my enrollment in the following courses:

| MJC Course to be taken | Semester to be taken | Institution | Notes (Office Use Only) | Approved | Denied |
|------------------------|----------------------|-------------|-------------------------|----------|--------|
|                        |                      |             |                         |          |        |
|                        |                      |             |                         |          |        |
|                        |                      |             |                         |          |        |
|                        |                      |             |                         |          |        |

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### OFFICE USE ONLY

**Staff Initials:** \_\_\_\_\_ **Date Processed:** \_\_\_\_\_ **Notified Student via Email:** \_\_\_\_\_

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

02/2021\_5/B