Request for Evaluation of Credits from Other Schools or Sources

Students must present a photo ID to process this request.

Note: Complete this form only if requesting a transfer of credits from a U.S. institution. To have credits transferred from a foreign institution (including Canadian), see a credentials analyst.

Name ___________________________ ____________ Student ID No. ____________________

Last First M I

Address ___________________________ City ___________________________ State/Zip __________

Major at Oakton ___________________________ Are you a veteran?  Yes  No

Educational Plans (check one):  A.A.  A.S.  A.A.S.  A.F.A.  A.S.E.  Certificate

List below the schools or sources from which you wish to have credits transferred. Where necessary, be sure to include on the line provided any other name, such as a maiden name, that may appear on your record. If you have not already done so, request each of the schools below to forward an official transcript of your work to:

Enrollment Center, Oakton Community College, 1600 East Golf Road, Des Plaines, IL 60016-1268.

All transcripts listed below must be on file in order for the evaluation process to begin.

School or source: ___________________________

School or source: ___________________________

School or source: ___________________________

School or source: ___________________________

Name on records if different from your present name: ___________________________

If any of the above transcripts have previously been evaluated by Oakton, please indicate which ones.

________________________

I hereby request that my transcripts from the above institutions be evaluated.

________________________

Signature of Student Date