



Request for Evaluation of Credits from Other Schools or Sources

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

Name _____ Soc. Sec. No. _____ - _____ - _____
Last First MI

Address _____ City _____ State/Zip _____

Major at Oakton _____ Educational Plans: A.A. A.S. A.A.S. A.F.A. A.S.E.
(check one) 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:

Office of Registration and Records, 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