

## REQUEST FOR TRANSFER CREDIT EVALUATION

ull Name:	F: .	Date:			
Last tudent ID#:		First <b>E-Mai</b>	l:	MI @ucd	lavis.ec
ajor:					
	you wish to h	nave evaluated for tran	sfer credit (a s	eparate form for each	
student petition	er to provide c		an appropriate	ourse. It is the responsibility evaluation (catalog description formed).	
				artment that teaches the cy to a course taught in the	at
• <b>Return</b> the co Engineering (R			Student Servi	ces Office of the College o	of
				UC Davis Equivalent	
Course #	Qtr. Units*	Institution	Term Q/Yr	Course #	
nave reviewed cour	se materials	semester institution, multiply and have determined t UC Davis course(s) list	nat the course	(s) taken at another institut	ion is
Faculty Signature		Print		Title	
ollege of Engineeri	ng:	********		********	**** —
		Date Associate	Dean, Undergro	aduate Studies	Date