

Transcript Evaluation

Date _____

CBC ID _____

Name _____

Certificate _____ Associate _____ Major _____

Address _____ City, State, Zip _____

E-mail _____ Phone Number () _____

Evaluate the following transcript(s) (**list name of colleges**)

Other documents to be evaluated (**submit documentation**)

_____ Advanced Placement

_____ CLEP

_____ Military experience

_____ Other _____

I understand that an official transcript/documentation will be in the Admissions/Registrar's Office before credit may be given and only courses with a CBC equivalent will be entered on my transcript. In addition, credits will only be posted if you have completed one full semester at CBC.

Signature

Date

*****OFFICE USE ONLY*****

_____ Not enrolled at CBC as of _____

_____ Waiting on transcript

_____ Unofficial transcript only

_____ No transcript

Coastal Bend College does not discriminate on the basis of race, creed, color, national origin, gender, age or disability.