WAYNE STATE UNIVERSITY

COLLEGE OF ENGINEERING

Transfer of Credit Evaluation– UG Curriculum

Engineering Records Office, Room 1163, 577-7535

We are requesting your office to evaluate the following transfer credit request. This is a College of Engineering form for tracking records of approvals of credit transfer.

Student Name: _____

PID No.: _____ Access ID: _____

Program Code (e.g., Pre-Prof in ME): _____

Form Initiated by: _____ Signature/Date: _____

Instructions:

1. Use one sheet for each course to be credited.
2. Please fill in the department and course number exactly as it appears on your transcript.
3. Students should prepare and submit a portfolio for each course to be evaluated.
4. Grades below C-minus are not acceptable for transfer.

College/University	Department & Course No.	Course Title	Semester Hours	Grade

Please check one:

☐ Course should be transferred and credited as _____

☐ Course should NOT be credited.

Evaluated by: _____

Name & Title Affiliation Phone Number and Email

(If appropriate, evaluator is encouraged to write a short summary of the evaluation process and observation)

Signature and Date: _____

Please return this form and the evaluation summary (if appropriate) to the Records Office, College of Engineering, Room 1163 of the Engineering Building.

Received by: _____

Name and Signature Date

Transfer Authorized by: _____

Dean's Signature Date

Transfer Confirmed to the Office of Credit Evaluation by: _____

Name and Date

Actions: ▪ CoE Records keeps this copy and makes copy to advisor & student ▪ Advisor makes note on SAAS