

REQUEST FOR EVALUATION

REQUESTED BY: _____

Counselor's Signature

INSTRUCTIONS: Please have official transcripts from all colleges previously attended sent to De Anza College, Admissions and Records, 21250 Stevens Creek Blvd., Cupertino, CA 95014. To be official a transcript must be delivered to us from issuing institution or hand carried in a sealed envelope.

SOCIAL SECURITY #: _____

DATE: _____

SEND EVALUATION TO:

NAME: _____

HOME PHONE: _____

ADDRESS: _____

WORK PHONE: _____

CITY: _____

STATE: _____

ZIP: _____

TRANSFER INSTITUTIONS

EDUCATIONAL GOAL:

CSU

UC

OTHER

Earn AA/AS & transfer for BA/BS

Transfer only - No AA/AS

 ___ General Ed

 ___ Major

Earn AA/AS without transfer

Earn a certificate: Circle One: *Completion Achievement Proficiency*

Curriculum/Major (see reverse) _____
Code and Title

TRANSCRIPTS TO BE EVALUATED (COLLEGE/UNIVERSITY):

1. _____

2. _____

3. _____

4. _____

*Military Evaluation (submit DD214 or DD295)

Evaluation Needed by:

1. Before Registering: _____
Quarter

2. Before Counseling Appt.: _____
Date Scheduled

3. Routine: _____

OFFICE USE ONLY

Make Folder

File

To Counselor

Eval. Mailed

Further Action: _____