



OFFICE OF THE REGISTRAR

Transfer Course Evaluation Form

This form is used by the Office of Admissions, Records and Registration in determining equivalencies and "blanket" substitutions for coursework transferred to Arkansas State University from accredited institutions. The following course is currently evaluated as "GENL" and "TRANSFER CREDIT." Please review the course details below and indicate the appropriate designation below - i.e. equivalent course, a "blanket" substitution, or neither. Must be signed and submitted by department chair.

TRANSFER INSTITUTION: _____

INSTITUTION CODE: _____

4-YEAR ☐

2-YEAR ☐

COURSE SUBJECT/NUMBER: _____

COURSE TITLE: _____

COURSE DESCRIPTION:

SELECT ONE OF THE FOLLOWING:

☐

EQUIVALENT:

This course is equivalent to the following Arkansas State University course:

☐

BLANKET SUBSTITUTION:

Although this course is not equivalent to an A-State course, we will always accept this course as a substitution for the following A-State course (i.e. for every student):

☐

NEITHER:

No equivalency or appropriate substitution exists. (Course will be designated as "**NE**" and "**TRANSFER CREDIT NOT EQUIVALENT**" on students' transcripts.)

Name: _____

Title: _____

Signature: _____ Date: _____

Please print/sign and deliver to the Office of Admissions, Records and Registration **OR** Type name above and submit electronically (must come from astate.edu email) by clicking Submit.

SUBMIT

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phone: (870) 972 - 2031 • fax: (870) 972 - 3917 • transfer@astate.edu