College of Arts & Sciences **Request for Transfer Credit Review**

NAME____BANNER ID______________________CATALOG YEAR________

DEGREE________MAJOR______________________SUPP. MAJOR____________________MINOR________________

SELECT: **____Re-Evaluation** **____Financial Aid** **____Second Degree Seeking** **____Foreign**
____Other______________________________________

INSTITUTION INFORMATION						**NMSU EQUIVALENCY TO:**		
NAME	SEMESTER	COURSE PREFIX	COURSE TITLE	CREDITS		COURSE PREFIX	COURSE TITLE	CREDITS

Justification____

___Approved ___Not Approved _________________________________ Department Head

___Approved ___Not Approved _________________________________ Dean

___Exception Processed _________________________________ Evaluator

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The purpose of the Request for Transfer Credit Review is for possible re-evaluation and identification of transfer credits earned.

Steps to Follow:

Departmental Requirements:

a. Print form and fill out in its entirety by advisor and/or department head.
b. Original signature from the department head is required for approval of request to be processed.
c. Hand-deliver form to Student Records in Advising Center, Breland Hall Room 152

General Education Core Requirements:

a. Print form and fill out in its entirety by advisor and/or department head.
b. Hand-deliver form to Student Records in Advising Center, Breland Hall Room 152
c. Assigned Record Specialist will review for Dean's approval and final processing.

Assigned Record Specialist for Processing Form Based on Last 2 digits of Student's Banner ID:

00 - 33	Terri-Lyn Mick	terrilyn@nmsu.edu
34 – 67	Rhonda Hunt	rhhunt@nmsu.edu
68 – 99	Susie Crouch	scrouch@nmsu.edu
All Digits	Hilda M. Olivas	hiolivas@nmsu.edu