

Completed form(s) must be submitted through your local campus for processing into NOLIJ.

(Incomplete forms will not be processed and will be returned to your local campus. Type or print clearly in blue or black ink.)

ONE FORM PER TRANSFER COURSE

Student Name: _____ MCC ID#: _____

College/University where course for requested re-evaluation was taken: _____

Title of course: _____

MCC course which you believe is this course's equivalent: _____

Please note that it is your responsibility to provide supporting documents (i.e. appropriate term course descriptions, syllabi, etc.). Failure to do so reflects negatively on the seriousness of your petition.

I am attaching supporting documents:

Yes ____ No ____

These include: _____

Rationale: _____

(Attach additional sheet if necessary)

I am aware that the MCC Registrar has final authority in the decision of a course's transferability into an MCC certificate or degree program. This form must be signed and submitted by your local campus Director of Student Services or Student Service Specialist before it can be submitted to the Registrar's Office.

The Registrar's decision will be submitted to the Director of Student Services or Student Service Specialist listed below.

Student Signature: _____ Date: _____

I have discussed the course in question above with the student. I believe the student has a valid petition.

Printed Name of DSS/SSS: _____

Title: _____ Campus: _____

Signature of DSS/SSS: _____ Date: _____