Graduate & Post-Bac Transfer Credit Evaluation Form (TCEF) (to be submitted with your application materials)

Any Rowan Global applicant or current student requesting a transfer-credit evaluation must complete this form in full and attach any related college transcript(s) and syllabi, including course description(s). Submission of official transcript(s) from all colleges attended is an application requirement for every Rowan University program. As long as all official transcripts are included with the application, an unofficial copy of the transcript(s) that relates to any requested transfer credits may be attached to this form.

Policy regarding transfer credit can be found in the Rowan Global catalog: rowan.edu/catalogs.

This form should be submitted with your application and other supporting materials to Rowan Global Academic & Student Services, Enterprise Center, 225 Rowan Boulevard, Suite 300, Glassboro, NJ 08028; faxed to 856-256-5638; or, emailed to globalstudent@rowan.edu.

Student Name:	Rowan (Banner) ID:
Street Address:	Phone:
City, State, and Zip:	Program:
Email Address:	Date of Request:

The above named student has requested that the following course(s) be applied to his or her program:

Course Title:		Course #:	Credits:	
Institution:		Semester/Year:	Grade:	
Title & CRS # of Rowan U course for which y	you believe this course will su	bstitute:		
$\dagger \Box$ Transcript showing course above attached	1? $\dagger \Box$ Syllabus for cou	rse above attached?		
Course Title:		Course #:	Credits:	
Institution:			Grade:	
Title & CRS # of Rowan U course for which y	you believe this course will su	bstitute:		
$\dagger \Box$ Transcript showing course above attached	1? $\dagger \Box$ Syllabus for cou	rse above attached?		
Course Title:		Course #:	Credits:	
Institution:				
Title & CRS # of Rowan U course for which y				
Transcript showing course above attached				
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Course Title:		Course #:	Credits:	
Institution:				
Title & CRS # of Rowan U course for which y	you believe this course will su	bstitute:		
\dagger \Box Transcript showing course above attached	1? [†] □ Syllabus for cou	rse above attached?		
APPROVALS:				
			Approved?	
Program Advisor or Coordinator	Date	Ť 🛛 Y	Tes † 🗖 No	
Department Chair	Date	<u>Appro</u> † □ Y	ved? Tes † 🗖 No	
r				
		Appro	wed?	
Dean of College in which the course is housed	Date	† □ Y	es † 🗖 No	