

**River Valley Community College**  
**One College Drive, Claremont, NH 03743-9707**  
**438 Washington Street, Keene, NH 03431**  
**15 Hanover St., Lebanon, NH 03766**

**REQUEST FOR EVALUATION OF TRANSFER OF CREDITS**

Student: \_\_\_\_\_ ID#: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

Program for which transfer of credit evaluation is to be done: \_\_\_\_\_

Student status:    \_\_\_ Matriculated for above program    \_\_\_ Accepted for above program  
                          \_\_\_ Application pending                                \_\_\_ Has not yet applied

**This evaluation of transfer credit is pending matriculation in the above program prior to \_\_\_\_\_.**

Students may be admitted to programs with advanced standing if they have taken appropriate college courses at another regionally accredited institution or System College and earned a "C" or higher. College courses for transfer credit beyond ten years will be evaluated by a Department Chair and/or the Vice President of Academic & Student Affairs. It is the student's responsibility to furnish official transcripts and, if requested, course descriptions. A Department Chair, Program Director or designee will evaluate each course and grade. The Vice President of Academic & Student Affairs determines if the credits should transfer and the student will receive a list of courses accepted for transfer. Grades of courses transferred are not included in the calculation of the Grade Point Average or the Cumulative Grade Point Average. Credits earned at another institution will be added to the total credits accumulated for graduation.

**Transfer credits from:** \_\_\_\_\_ **Year(s) attended:** \_\_\_\_\_

**Please check here if outside coursework is greater than ten years old.**     **Please check here if terminal degree was awarded.**

TRANSFER COURSE NO. & TITLE	CR	RVCC COURSE NO. & TITLE OR ELECTIVE	CR	Approved by DC	Approved by VPASA

**Submit this form with official transcripts and course descriptions to the Registrar's Office. Transfer of credit should be done prior to the beginning of a semester.**

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**OFFICE USE ONLY**

\_\_\_\_\_  
 Program Director/Chairperson-Liberal Arts Dept. (if applicable)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Registrar

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Vice President of Academic & Student Affairs

\_\_\_\_\_  
 Date

Copies:    White (Registrar's Office)    Blue (Advisor/Program Director)    Yellow (Student)    Pink (Admissions Office)