

# Sociology Department Transfer Credit Evaluation Form

*This form should be filled out completely by the student seeking Transfer Credit Evaluation.  
**Please attach your Transfer Credit Report and Syllabi to this form.**  
Courses are evaluated weekly, and you will be notified via email of decisions.*

---

<b>Last Name</b>	<b>First Name</b>	<b>OSU e-mail address</b>
------------------	-------------------	---------------------------

---

<b>Major</b>	<b>College of Enrollment</b>	<b>Quarter/Year of Admission to OSU</b>
.....		

---

Title and # of course at previous university	University
--	------------

---

Title and # of course at previous university	University
--	------------

---

Title and # of course at previous university	University
--	------------

**Are these the original syllabi? Please explain:**

---

**Certification of Truth Statement:** By my signature I affirm that the information I provided for transfer credit evaluation, and any other information I have submitted in connection with the transfer credit evaluation process, is complete and accurate. I understand that submission of incomplete, inaccurate, or counterfeit materials is cause for sever academic ramifications which may include referral to the Committee on Academic Misconduct.

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

.....  
*Office Use Only*

Dr. Lindsey Joyce Chamberlain	
Name of Advisor Receiving Transfer Credit Documents	Date Received

Course(s) evaluated as: \_\_\_\_\_

Degree Audit Exception: \_\_\_\_\_

DCE submitted: \_\_\_\_\_

OSASC: \_\_\_\_\_

Staff Journal: \_\_\_\_\_