

**BLUE RIDGE COMMUNITY COLLEGE
TRANSCRIPT EVALUATION REQUEST FORM
(For transfer credit from another institution)**

NAME: _____

EMPLID: _____

VCCS EMAIL ADDRESS: _____

Evaluation will NOT occur until BRCC has received OFFICIAL transcripts from previous colleges/universities (excluding VCCS schools) and you have been *accepted* into a BRCC program of study.

Please do not request official transcripts be sent until all courses are complete and grades are posted. Evaluations will be complete within 30 days.

Instructions:

1. After official transcripts have been sent to the BRCC, complete and submit this form to the Admissions & Records Office. Official transcripts are needed if course work was taken at a non-VCCS institution.
2. For military training evaluations, submit official AARTS transcript.
3. For advanced standing credit, submit official transcripts for CLEP, AP, etc.

CURRICULUM: _____ APPLICATION DATE: _____

PRESENTLY ENROLLED: () YES () NO IF NO, LAST DATE OF ATTENDANCE: _____

LIST ALL COLLEGES ATTENDED:

NOTE: You may be requested to furnish a copy of the appropriate catalog(s) or course description/syllabus for any college or university listed above.

The College will evaluate my transcript *only* for my declared major. I will need to submit another request form if I change major.

I understand the official transcript evaluation will be sent to me electronically at my official VCCS email address, listed above. A printed copy will also be placed in my student file.

STUDENT SIGNATURE: _____ DATE: _____