RUTGERS
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of the Arts

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Transfer Course Departmental Evaluation Form

Name: _____   _____   _____

    Last   First   Middle Initial

RUID: _____   Official Rutgers Email ONLY: _____

Major Department: _____

Please note: This form is not to be used for New Jersey Community College Courses.

_____   _____

Course Name and Number   College/University

Semester _____   Year_____   Credits _____

I am submitting the following for review: _____ Syllabus   _____ Course Description

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Departmental Evaluation

_____   _____

Departmental Advisor or Chair (please print)   Department

Please check one:

_____   This course is equivalent to the following Rutgers-NB course: _____

_____   This course should count as a major elective in my department, and should be given the
                transfer equivalent code 01:_____:MAJ (enter your department code)

_____   This course should count as a major elective in my department, and should be given the
                transfer equivalent code 01:_____:EC (enter your department code)

_____   This course should be given elective credit only. It should not count as a course for my
                department, and will be given the transfer equivalent course code TR:T07:EC.

_____   This course is not transferrable.

_____   _____   _____

Approval Signature   Title   Date

DEAN'S OFFICE USE ONLY   Rev February 2018