

**REQUEST FOR EVALUATION OF RECORDS (UNDERGRADUATE)**

\*\*\*Note: Academic Evaluations may be requested upon completion of 61 semester hours or more toward your baccalaureate degree.\*\*\*

Student Name	UOG ID No:
Phone Number(s):	Email Address:
<b>REQUESTING FOR:</b> <input type="checkbox"/> Current Student Academic Evaluation <input type="checkbox"/> Former Student Transfer Credit Evaluation <input type="checkbox"/> New Student Transfer Credit Evaluation	<b>FOR TRANSFER CREDIT EVALUATIONS:</b> Name of College/ University _____ _____
Major: _____ Minor: _____ Catalog Year: _____ Semester First Enrolled: _____ Last Semester of Enrollment: _____	Degree Seeking: <input type="checkbox"/> BA <input type="checkbox"/> BA.Ed <input type="checkbox"/> BBA/BBAA <input type="checkbox"/> BS <input type="checkbox"/> BSW <input type="checkbox"/> BSN

Your evaluation will be made based on the catalog in force at the time of your initial enrollment provided that (1) You have not stopped out for more than one regular semesters (summer session is not a regular semester) or (2) You have not changed your major (Declaration of a major by undeclared students does not constitute a Change of Major). If either have occurred, your evaluation will be based on the catalog in force at the time that you return to the University of Guam or at the time that you changed your major.

This evaluation is picked-up. By: \_\_\_\_\_

Please email this evaluation to: \_\_\_\_\_

**NOTE:** Allow two weeks after the date of this request for the results of this evaluation. Allow a month or longer at peak times. After you receive the evaluation, please see your advisor if you have any questions. It is your responsibility to keep this office informed at all times of any changes in graduation plans, major, or curriculum after this request has been filed. Students may also obtain a preliminary evaluation using the Self-Service system.

**APPLICATION FOR DEGREE MUST BE FILED A SEMESTER PRIOR TO COMPLETION**

\_\_\_\_\_ Student's Signature

\_\_\_\_\_ Date

**OFFICIAL USE ONLY**

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Processed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Print name and Signature