



**Enrollment Center**

1600 East Golf Road, Des Plaines, IL 60016, 847-635-1700, Fax 847-635-1706  
7701 North Lincoln Avenue, Skokie, IL 60077, 847-635-1400, Fax 847-635-1497  
Email: registrarservices@oakton.edu

# Request for Evaluation of Credits from Other Schools or Sources

Students must include a copy of a photo ID to process request.

**Request form may be completed by students who have applied for admission as a degree or certificate seeking student who wishes to transfer credits to Oakton College. Credits may include:**

- College-level work completed at another college or university
- Passing scores from AP (Advanced Placement) or CLEP tests
- Military Transcripts

Name \_\_\_\_\_ Oakton ID No. \_\_\_\_\_  
Last First MI

Name on records *if different* from current name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Educational Plans (*check one*):  A.A.  A.S.  A.A.S.  A.F.A.  A.G.S.  A.S.E.  Certificate

*List Major ONLY IF seeking an A.A.S. or Certificate.*

Major Name: \_\_\_\_\_ Are you a veteran?  Yes  No

It is the student's responsibility to request official transcripts for all credits to be transferred from colleges, universities, AP, CLEP, or military.

Send official transcripts to: Enrollment Center, Oakton College, 1600 East Golf Road, Des Plaines, IL 60016 --- enrollmentcenter@oakton.edu.

**List the college or university from which you wish to have credits transferred.** Credits transferred from a foreign institution (including Canadian) must be a CATALOG MATCH through Educational Perspectives, www.edperspective.org/oakton.

**All transcripts listed must be on file in order for the evaluation process to begin.**

**If transcripts are not received within 30 days of form submission, the evaluation request will be voided.**

College/University/Source	City/State	CREDENTIALS USE ONLY Date Transcript Received	Credentials Code

I hereby request that my transcripts from the above institutions be evaluated.

\_\_\_\_\_  
*Signature of Student*

\_\_\_\_\_  
*Date*