



**San José State University
Graduate Admissions and
Program Evaluations
(GAPE)**

Last Name

First Name, M.I.

Student ID

Previous Name, if any

Home Street Address

City, State, Zip Code

Daytime Phone

Email Address

Required Signatures

Student Signature

Date

Approved **Denied**

**Master's Committee Chair
or Graduate Advisor (print)**

**Master's Committee Chair
or Graduate Advisor (signature)**

Date

Approved **Denied**

GAPE Evaluator (print)

GAPE Evaluator (signature)

Date

Request for Validation of Transfer Credit

INSTRUCTIONS FOR STUDENT AND GRADUATE ADVISOR

1. This form should be used only if a transfer-course evaluation must be conducted prior to submission of a Candidacy form. If an advanced evaluation is not necessary, the transfer course(s) should simply be included on the Candidacy form itself in Section D. University restrictions on the kind and amount of transfer-course credit permitted can be found in the university catalog.
2. A separate form must be filled out for each transfer course.
3. An official sealed transcript must be submitted with this form.
4. A copy of the course description must be attached so the graduate advisor may make an informed decision.
5. Graduate advisor: Please enter an SJSU course that is equivalent to the requested transfer course, if required for graduation, that is not an elective course. If there is a compelling reason for substituting a non-equivalent transfer course for a SJSU required course, submit a written justification to the associate dean of Graduate Studies & Research.
6. The completed form should be submitted to the front counter of the Office of Graduate Admissions & Program Evaluations in the Student Services Center.

TRANSFER COURSE TO BE EVALUATED

<input type="text"/>	<input type="text"/>	<input type="text"/>
Institution (University or College)	Units	Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>
Location of Institution (City, State, Country)	Term and Year Taken	
<input type="text"/>	<input type="text"/>	
Course Title	Dept and Course Number	
<input type="text"/>		
URL for Course Description		
<input type="checkbox"/> Semester Course <input type="checkbox"/> Quarter Course <input type="checkbox"/> Other (specify) <input type="text"/>		
<input type="checkbox"/> Undergraduate Course <input type="checkbox"/> Graduate Course		

TO BE COMPLETED BY GRADUATE ADVISOR ONLY

The requested course above is equivalent to the following SJSU course. If none, check box at right (but see instruction no. 5 above).

No Equivalent SJSU Course

Dept and Course Number

Course Title

For Office Use Only

Number of semester units granted _____

Comments
