

TRANSFER COURSE EQUIVALENCY FORM

DEPARTMENT OF PHYSICS AND ASTRONOMY

San Jose State University • One Washington Square • San Jose, CA 95192-0101 • Ph: (408) 924-5210 • Fax: (408) 924-5217

This form is for all undergraduate students seeking to satisfy degree requirements by using transfer course credit granted at admission as a substitute for physics courses taught at San Jose State University.

Instructions for student: Complete and submit this form along with the following documentation for each transfer course or course sequence.

- Print-out of “external credit” pages of degree progress report from your my.sjsu.edu on-line account. *
- Copy of course description for each transfer course from the previous institution’s college catalog.
- Unofficial copy of your transcripts from that institution, showing the course(s) and your grades.
- Copy of the syllabus (Greensheet) that lists the topics for each transfer course.
- Any other course material that may assist the evaluator to determine equivalency (e.g. textbooks, midterm exams, final exam, major paper or lab report, lab schedule, etc.)

You should expect that this process may take several weeks, so it is important to plan ahead to allow sufficient time for the evaluating faculty member to perform this task on your behalf.

* If transfer credit has not been posted before completing this form you should obtain, fill-out, submit, then wait for processing and receipt of the form entitled *Request for Additional Baccalaureate Credit OR Equivalent College Credit*. Upon its receipt after processing has finished, attach it to this form instead of the print-out of external credit.

The student named below has requested that the transfer course(s) listed be substituted for the indicated SJSU course(s) in his/her program. Please review comparability of the following - prerequisites, lec/lab hrs, topics, level (i.e. major vs non-major, LD or UD), course grade and certify:

- 1) Substantial Equivalency (or not).
- 2) Approximate Semester Unit Credit equivalency, then sign in the appropriate column.

REQUESTOR

Last Name:	First Name:
SJSU Identification Number: _____	Declared Major:
Home Phone Number:	Work Phone Number:
E-Mail Address:	
Mailing Address:	

COURSE(S) TO BE EVALUATED

Institution:	Course Number:	Course Title:	Semester Quarter <i>(circle one)</i>	# of Units:	Year Taken:
SJSU Course Number: PHYS _____		SJSU Course Name:			
*** TO BE FILLED OUT BY EVALUATOR ***					
Equivalent Not Equivalent <i>(circle one)</i>		Semester Unit Credit:	Evaluator Signature:		

Institution:	Course Number:	Course Title:	Semester Quarter <i>(circle one)</i>	# of Units:	Year Taken:
SJSU Course Number: PHYS _____		SJSU Course Name:			
*** TO BE FILLED OUT BY EVALUATOR ***					
Equivalent Not Equivalent <i>(circle one)</i>		Semester Unit Credit:	Evaluator Signature:		

APPROVAL SIGNATURE

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