



**Appeal Procedures
TRANSFER COURSE EQUIVALENCY PRE-APPROVAL**

Students may request a pre-approval of their transfer courses if the course in question does not have a current equivalency established by CSU showing on [Transferology](#).

Step1: Check Transferology to determine if the course in question has been evaluated and is listed with a direct equivalency. If no, then this form will be required.

Step 2: Fill out the Transfer Course Equivalency Pre-Approval form. You will need to provide a copy of the course description or a course syllabus along with the form to the CSU Teaching Department of the course.

Step 3: Call the CSU Teaching Department and indicate that you have a Course Equivalency Pre-approval form that needs to be reviewed. Ask the department for what their process is for dropping of this form as you may be required to make an appointment.

Step 4: Leave your form with the CSU Teaching Department. Once reviewed the completed form should be sent to:

*Office of the Registrar Centennial Hall
1063 Campus Delivery
ro_registraroffice@mail.colostate.edu,
(970)491-4860, fax: (970)491-2283*



REQUEST FOR TRANSFER COURSE EQUIVALENCY PRE-APPROVAL FORM

*SECTION A (To be completed by student--please print or type

Name: Last, Preferred First, Middle
Major(s)
Host Institution You Will Attend

CSUID Number
Pronouns (Optional)
Intended Term & Year of Graduation
Term & Year You Will Attend

SECTION B (To be completed by teaching department)

The course(s) listed below do not have a current equivalency established by CSU showing on Transferology. As a result, the student noted above has requested a pre-evaluation of one or more transfer courses. Based on course description/syllabus information provided by the student, I authorize the following equivalencies for each course listed below:

List the course numbers and titles of the courses you plan to enroll in at the host institution you will be attending.

Table with 8 columns: Course Number, Transfer Institution Title, CSU Equivalent or AUCC Requirement, # of Transfer Credits, Teaching Dept**, Printed Name from Teaching Dept**, Signature of Teaching Dept**, Applies to all or This Student ONLY (check one). Includes an example row for ANTH3.

** This must be signed by the CSU Teaching Department Head or Designee that teaches the course you are transferring back to CSU.

PRINTED Name of Teaching Department Head or Designee _____ DATE _____

SIGNATURE of Teaching Department Head or Designee _____