



# *Request for Pre-Evaluation of Credits*

In order to process a Pre-Evaluation of your credits, please complete the information below:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Birth Date: \_\_\_\_\_

E-mail: \_\_\_\_\_

Major: \_\_\_\_\_

Colleges/Universities Attended	Dates Attended
_____	_____
_____	_____
_____	_____

**Please e-mail, fax, or mail this form with an unofficial copy of a transcript from each university/college attended. If you provided an e-mail address, your pre-evaluation will be emailed to you. If not, it will be sent through regular mail to the address you provided above.**

**E-mail:** *admissions-inquiry@iup.edu*

**Fax:** 724-357-6281

**Address:** Office of Admissions  
Transfer Services  
Sutton Hall, Suite 117  
1011 South Drive  
Indiana, PA 15705