

ASNUNTUCK COMMUNITY COLLEGE
Application for Transfer Credit

Name _____ Student ID #/SSN # _____
Street Address _____ Maiden Name _____
City, State, Zip _____ Phone _____

Instructions: Please check the degree or certificate program you wish to have transfer credit evaluated towards.

Associate Degree Programs:

- | | |
|---|---|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Liberal Arts/Fine Arts (AA) |
| <input type="checkbox"/> Business Administration | <input type="checkbox"/> Technological Studies |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Tech. Studies: Electro-Mechanical/Maintenance
Tech. Option |
| <input type="checkbox"/> Communications Broadcasting | <input type="checkbox"/> Tech. Studies: Lean Manufacturing Supply Chain
Management Option |
| <input type="checkbox"/> Communications Journalism | <input type="checkbox"/> Tech. Studies: Machine Technology Option |
| <input type="checkbox"/> Criminal Justice | <input type="checkbox"/> Tech Studies: Manufacturing Electronic &
Controls Technology Option |
| <input type="checkbox"/> Early Childhood Education | <input type="checkbox"/> Tech Studies: Manufacturing Welding
Technology Option |
| <input type="checkbox"/> Engineering Science | |
| <input type="checkbox"/> General Studies | |
| <input type="checkbox"/> Human Services | |
| <input type="checkbox"/> Information Systems Technology | |
| <input type="checkbox"/> Liberal Arts (AA) | |

Certificate Programs:

- | | |
|---|---|
| <input type="checkbox"/> Accounting Assistant | <input type="checkbox"/> Machine Technology, Level I & II |
| <input type="checkbox"/> Advanced Manufacturing Welding Technology | <input type="checkbox"/> Manufacturing Electronics Fundamentals |
| <input type="checkbox"/> Business Administration | <input type="checkbox"/> Manufacturing Electronics Systems &
Controllers |
| <input type="checkbox"/> Child Development Associate (CDA Training) | <input type="checkbox"/> Manufacturing Welding Technology
Fundamentals |
| <input type="checkbox"/> Community Based Corrections | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Computer Aided Drafting | <input type="checkbox"/> Office User Specialist |
| <input type="checkbox"/> Early Childhood Administration | <input type="checkbox"/> Publications |
| <input type="checkbox"/> Early Childhood Education | <input type="checkbox"/> Software Development |
| <input type="checkbox"/> Entrepreneur | <input type="checkbox"/> Supply Chain Management |
| <input type="checkbox"/> Gerontology | <input type="checkbox"/> Team Leader Management Skills in
Manufacturing |
| <input type="checkbox"/> Health Career Pathway | <input type="checkbox"/> Team Leader Technical Skills in Manufacturing |
| <input type="checkbox"/> Human Services Management | <input type="checkbox"/> Web Designer |
| <input type="checkbox"/> Lean Manufacturing | |
| <input type="checkbox"/> Manufacturing Electro-Mechanical
Maintenance Technology | |

OTHER: _____

Previous Colleges Attended: It is your responsibility to request that an **official transcript** be sent to the Asnuntuck Community College Admissions Office from each college previously attended.

Name of College(s) to be evaluated: _____ Dates of Attendance: _____

Signature _____ Date _____