## UMSL/Washington University Joint Engineering Program Course Evaluation Request

## Please submit a separate copy of this form for EACH course to be evaluated

	Last Name	First Name		Today's Date	
	Email Address		Student ID Number	<del></del>	
Complet	te items 1 through 6 for all r	requests. Your course will i	าot be evaluated if the ir	nformation is not provided	
1.	Name of the department offering the course, the course number, and full name of the course to be evaluated:				
	Dept.:	Course #	Title :		
2.	College or University:		Location:_		
3.	Number of Credit Units: _	Number of Credit Units:Credits are: Quarter Units  Semester Units			
4.	At this college, what range	of course numbers indicate	2:		
	Freshman level?(Ex. At UMSL Freshman 100	Sophomore level? 00-1999, Sophomore 2000-2			
5.	What are prerequisite courses for this course, if any?				
	What is the next course in the sequence, if any?				
6.	Attach to this form a copy of the course description from the College Bulletin or Catalog Course Listings Copy of course description attached Yes $\square$ No $\square$				
	IF NO, where did you obtain	n the information?			
7.	Course Textbook, title and a	author:			
8.	Attach a copy of the syllabus for the course (this might be found on the college website)				
	estions about the engineering us <u>mcmanus@umsl.edu</u> 314		the Joint Program can b	e directed to Mary	
		For Office Use	-		
:valuati	<b>ion</b> $\square$ Yes, this course will be	e accepted for transfer as ed	uivalent to		
valuati	ion $\square$ No, this course will no	ot be accepted for transfer			
	Evaluator			Date of Evaluation	
	_				
₹valuato	or: Please return this form to	Mary McManus <u>mcmanus</u>	@umsl.edu		