

Transcript Evaluation Request Form for Non-degree Licensure-only Students

Please attach this form to a photocopy of all transcripts for evaluation and a self-addressed, letter size, stamped envelope. Transcripts that do not include all of the requested materials will be returned to the sender.

Please Print or Type:

Name: _____ Student ID # _____

(If a Meredith student)

Address: _____

(Address)

(City)

(State)

(Zip)

Email Address: _____

Date of Birth (mm/dd/yyyy) _____

(To help us find you in the college's system)

Date submitted : _____

Phone: (_____) _____

Degree(s): _____

University: _____

Degree(s): _____

University: _____

_____ I have never been certified/licensed to teach in the State of North Carolina.

_____ I now hold a NC teaching certificate or license in subject area(s) noted below:

(Indicate even if license needs to be renewed)

_____ I now hold an out-of-state teaching certificate or license in subject area(s) noted below:

(Indicate even if license needs to be renewed)

License Area: _____

State: _____

(Indicate if other than NC)

_____ I am a current or past Meredith College student or have applied to MC and have paid the admission fee.

No evaluation fee required.

_____ I am NOT a current or past Meredith College student, nor an applicant to MC.

Attached is my check or money order (\$25 for each area of evaluation), Payable to Meredith College.

Mail to:

Transcript Evaluator

207A Ledford Hall

Meredith College

3800 Hillsborough Street

Raleigh, NC 27607-5298

For office use only:

Date received: _____ **Date returned:** _____

Evaluator: _____

SEE REVERSE SIDE OF THIS FORM

Area (s) for Evaluation

(Please review Transcript Evaluation Guidelines for information)

_____ Birth-Kindergarten (BK)

_____ Elementary Education (Kindergarten-grade 6)

_____ Middle Grades (Grades 6-9) Please indicate area (s)

Areas: _____ Language Arts _____ Science

_____ Mathematics _____ Social Studies

_____ Secondary (Grades 9-12) Please indicate area (s)

Areas: _____ English _____ Comprehensive Science

_____ Mathematics _____ Social Studies

_____ Special Subject (Grades Kindergarten-12) Please indicate area (s)

Areas: _____ Art _____ Dance

_____ English as a Second Lang. (ESL) _____ Physical Education

_____ Music _____ Theatre

_____ French _____ Spanish

_____ Family Consumer Sciences (Grades 7-12)

_____ X \$25.00 = _____ Total amount due (If required)

Total Areas

For office use only:

Payment received: _____ Date: _____

Check or money order # _____ Received by: _____

SEE REVERSE SIDE OF THIS FORM