College of Information and Computer Sciences
Transfer Credit Evaluation (TCE)

Date: _____

To validate courses taken outside of UMass Amherst with the expectation to complete this process *prior to* taking the course. This is a pre-cursor to the following University paperwork (to be submitted after CS TCE approval):

☐ Prior Approval for Transfer Course Work Form (PAF)   ☐ Senior Year in Absentia Form (SYIA)   ☐ International Course Approval Form (ICAF)

To request a review of a course(s) transferred upon admission as generic CS credit (i.e., CMPSCI 1TRA, etc.), or for Five College course equivalency (only this form needed).

☐ Transfer Course Equivalency Review (TR EQ)   ☐ Five College Course Equivalency Review (5C EQ)

Name: _____   SPIRE ID#: _____   Email: _____@umass.edu

Expected Graduation Date (circle): May   Feb   Sep _____ (year)

Major: ☐ BS-CS (primary major)/☐ SM-BS-CS (secondary major)   ☐ BA-CS (primary major)/☐ SM-BA-CS (secondary major)   ☐ OTHER: _____

Form Instructions (for CS course equivalents only):

1. Complete one form per College/University.
2. Email the TCE form with the supporting materials (all information applicable to the course) in one pdf document to tce@cs.umass.edu. Incomplete forms will not be reviewed.
3. CS will distribute the supporting materials to the appropriate faculty for a decision about the course equivalency. Final approval is by the Undergraduate Program Director (UPD).

4. Students will be notified of decision(s) via @umass email.
5. If additional University paperwork is required, students will be instructed to complete and submit the appropriate form (PAF, SYIA, ICAF) to Darlene Fahey, Undergraduate Program Manager, College of Information and Computer Sciences, 100 CS Bldg. No additional form is required if the approval is an evaluation of generic transfer (TR EQ) or 5-College credit (5C EQ).

STUDENT COMPLETES THIS SECTION
College/University Name (use one form per school): _____

Course Dept & No.	Course Title	Credits	Term/Year	Grade	Select Type: PAF, SYIA, ICAF *or* TR EQ, 5C EQ	UMass COMPSCI Equivalent	UMass COMPSCI Course Title	Instructor Name	Crs Desc, Text, Syllabus Reviewed by Instructor	Instructor Approved Equivalency	Instructor Signature & Date	UPD Approval Signature & Date
									☐ Yes ☐ No If no, basis for evaluation:	☐ Yes ☐ No ☐ No, but equiv to:		
									☐ Yes ☐ No If no, basis for evaluation:	☐ Yes ☐ No ☐ No, but equiv to: _____		
									☐ Yes ☐ No If no, basis for evaluation:	☐ Yes ☐ No ☐ No, but equiv to: _____		
									☐ Yes ☐ No If no, basis for evaluation:	☐ Yes ☐ No ☐ No, but equiv to: _____		
									☐ Yes ☐ No If no, basis for evaluation:	☐ Yes ☐ No ☐ Other Course _____		

CS INSTRUCTOR COMPLETES THIS SECTION spans Instructor Name through Instructor Signature & Date. *CS DEPT USE ONLY* spans UPD Approval Signature & Date.

IMPORTANT: The College of Information and Computer Sciences Undergraduate Program has a **Residency Requirement** with a limit on the number of transfer courses that will be accepted to fulfill upper level CS Electives toward major requirements. No more than 3 transfer courses are allowed for the BS and no more than 2 transfer courses are allowed for the BA. Therefore, for the **BS:** 5 of the 8 CS Electives must be taken here at UMass Amherst. For the **BA:** 3 of the 5 CS Electives must be taken here at UMass Amherst. There is also a limit of one Five College course to fulfill upper level CS Electives for either the BS/BA.

College of Information and Computer Sciences
Transfer Credit Evaluation (TCE)

Date: _____

Name: _____ SPIRE ID#: _____ Email: _____@umass.edu

Expected Graduation Date (circle) : May   Feb   Sep _____(year)

Major: ☐ BS-CS (primary major)/☐ SM-BS-CS (secondary major)   ☐ BA-CS (primary major)/☐ SM-BA-CS (secondary major)   ☐ OTHER: _____

I am seeking a course equivalency review of the following course for:

COMPSCI _____   Course Title: _____

Please review the following materials:

College/University: _____   Location: _____

Course No: _____   Course Title: _____

Credits: _____   Grade, if completed or note in progress (IP): _____

Semester & Year taken: _____

Instructor Name: _____   Instructor Email: _____

Course Description for the Semester & Year taken:

Course URL: _____

Textbook name, author, etc: _____

_____

Syllabus (attach or URL): _____