



**UNITED TRIBES
TECHNICAL COLLEGE**

REGISTRAR'S OFFICE

3315 University Drive
Bismarck, North Dakota 58504
701.221.1850
registrar@uttc.edu
Fax: 701-530-0636

Transcript Evaluation

Student Name: _____

ID# _____

Year: _____

Term: _____

Program: _____

Transcript Source (College, etc.): _____

Year	Term	Transfer Course Code	Transfer Course Name	Grade	Credits	UTTC Course Code	UTTC Course name
Total Transfer Credits:							

Advisors Signature: _____

Date: _____

Registrar Signature: _____

Date: _____