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## TRANSFER CREDIT EVALUTATION FORM; VETERANS AND ELIGIBLE PERSONS

**Instructions:** Complete Section A and Section B below. Submit the completed form along with a copy of your high school diploma and all transcripts /records of prior training to GIA for evaluation. Send to [VAbenefits@gia.edu](mailto:VAbenefits@gia.edu) or mail to GIA Office of Student Financial Assistance, Attn: VA Benefits MS#7, 5345 Armada Drive, Carlsbad, CA 92008.

SECTION A: STUDENT INFORMATION	
Date:	Program:
Name:	GIA Location:
Social Security No:	
SECTION B: PREVIOUS EDUCATION AND TRAINING	
Name of College or Training Establishment:	
Subjects or Classes Taken:	
Dates:	Degree/Certificate Earned:
Name of College or Training Establishment:	
Subjects or Classes Taken:	
Dates:	Degree/Certificate Earned:
Name of College or Training Establishment:	
Subjects or Classes Taken:	
Dates:	Degree/Certificate Earned:
THIS SECTION TO BE COMPLETED BY GIA OFFICIAL	
Date Transcripts Received:	Annotated transcripts attached (initial):
Evaluated by:	Date Student Notified of Results:
Results of evaluation (clock hours or credit granted):	0