Student's Email address: …………………… Mobile number:……

Course Equivalency Verification Request Form

Trimester …… Academic Year ……….. - …………

Date ………/…………/…………

Dear Associate Dean for Educational Affairs,

My name is …………………………..….………, Student ID no. …….………..,

Majoring in ……………...……… and Minoring in …………...……………, would like to request for course(s) equivalency verification:

1. Course code/title   ......………………………………….… (with the grade of……….)

   is equivalent to   …………………………………………...

   > **PD of the course(s)' comment & signature** (*Instructor's signature may be required for endorsement if the course contains specific details*.)**:**

2. Course code/title   ......………………………………….… (with the grade of……….)

   is equivalent to   …………………………………………...

   > **PD of the course(s)' comment & signature** (*Instructor's signature may be required for endorsement if the course contains specific details*.)**:**

3. Course code/title   ......………………………………….… (with the grade of……….)

   is equivalent to   …………………………………………...

   > **PD of the course(s)' comment & signature** (*Instructor's signature may be required for endorsement if the course contains specific details*.)**:**

Student's reason: ☐ Change of major ☐ Curriculum revision   ☐ Combined class (*master & joint sec.*)
                                 ☐ Counted for …………………………….....   ☐ Others (*Please specify*)*:* ……………
…………………………………………………………………………………………...……

Supporting document: ☐ Grade report
                                 ☐ Others (*Please specify*)*:* ……………………………………………………………...……

I hereby fully acknowledge that this request is not a guarantee of approval.

…………………………………………
Student's signature

Comment:	☐ **Approved by:** ☐ **Not approved by:**	
	…………………………… **Divisional Chair of** ………………	…../…./…..
Comment:	☐ **Approved by:** ☐ **Not approved by:**	
	…………………………… **Assoc. Dean for Educational Affairs**	…../…./…..