Internal Course Equivalency Checklist



| PERSONAL INFORMATION | | | | | |
|---|--|----------------------------------|----------------------|----------------------|--|
| Last Name: | First Name: | First Name: | | Student Number: | |
| PROGRAM INFORMATION | | | | | |
| The following course(s) have been appr | roved under special circumstances to be equivale | nt for the purposes of meeting g | raduation requirem | ents in: | |
| Program Name: | | | | | |
| | | | | | |
| Course Number | Course Name | Term | Grade | Credits | |
| | F 1 1 1 1 | | | | |
| | Equivalent to | | | | |
| | | | | | |
| Course Number | Course Name | Term | Grade | Credits | |
| | | | | | |
| | Equivalent to | | - | | |
| | | | - | | |
| Course Number | Course Name | Term | Grade | Credits | |
| | | | | | |
| | Equivalent to | | _ | | |
| | | | - | | |
| Course Number | Course Name | Term | Grade | Credits | |
| | | | | | |
| | Equivalent to | | | | |
| | | | - | | |
| | | | | | |
| Please Note: By signing this document, 8614: Advanced Standing – Course Cha | the Chair is confirming courses have met all subsillenge. PLA. Transfer Credit guidelines. | sequent course pre-requisites an | d approvals are in a | accordance to Policy | |
| | | | | | |
| | | | | | |
| Chair Name | Date | Chair Signature | | | |
| | | | | | |
| Registrar Name | Date | Regis | Registrar Signature | | |