## COURSE EQUIVALENCY REQUEST

A separate formand supporting documents be completed and submitted for each course equivalency request. Equivalency is not granted for student teaching EDSS 300 and ErE0 0 1 371.65 680.4 TJ wt612 0000912 0 612 792 re P 0 0 1 576.23 17.2a

Name				
Las		First	M.I.	
Address				
Street	Apt. #	<b>C</b> ty	Zip	
Phone	Email			
WhichCSULB course requiren	nent do you believe	e you have <u>met?</u>		
Pleasecomplete the following of	r the course(s) you	believe <b>ės</b> uivalent to the a	above CSULB course:	
Course Subjet & Number		Course Title	Units	
Semester/Year Taken	Institu	ution Where Course Taken	Grade Earned	
ATTACH THE FOLLOWING:				
		i i	and back of transcripts other than	CSU
	•	m the atalog of the institution	-	
		EL 452, EDSE 435, EDSE 43	DTE: Requests ftbre following cours	ses
Candidates will be emaid the resu	•		•	
	•	ND CREDENTIAL PROGRA		
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