COURSE EQUIVALENCY REQUEST

A separate form and supporting documents must be completed for <u>each</u> course equivalency request. Equivalency is not granted for student teaching, EDSS 300 and EDSS 450. Students may apply a <u>maximum of 9 units</u> of course equivalency. Submit this completed form with the documents listed below in EED - Room 67.

Please check program:

☐   **Multiple Subject Credential Program**
☐   **Education Specialist (Special Education) Credential Program**
☐   **Single Subject Credential Program**
☐   **Urban Dual Credential Program**

NOTE: This Course Equivalency applies to the program checked above ONLY. Please note that a course equivalency that meets the requirements for this credential program may not meet the requirements for academic credit towards a degree program. Students seeking Course Equivalency for courses in the College of Education Advanced Credential or Master's Degree Programs should use the Graduate Office Form found at: http://www.ced.csulb.edu/graduate/petitions-course-equivalency.

Date: _____ Social Security # _____ CSULB ID #_____

Name_____
                  Last   First   M.I.

Address_____
              Street   Apt. #   City   Zip

Phone _____ Email_____

Which CSULB course requirement do you believe you have met? _____

Please complete the following for the course(s) you believe is equivalent to the above CSULB course:

Course Subject & Number	Course Title	Units

Semester/Year Taken	Institution Where Course Taken	Grade Earned

ATTACH THE FOLLOWING:
- a photocopy of your transcript verifying completion of the course (Include front and back of transcripts other than CSULB)
- a photocopy of the official course description from the catalog of the institution where you took the course
- a course syllabus, if possible, from the institution where you took the course (NOTE: Requests for the following courses <u>require</u> submission of a Course Syllabus: EDEL 452, EDSE 435, EDSE 436, EDSE 457)

COURSE EVALUATOR AND CREDENTIAL PROGRAM OFFICE USE ONLY
Course Evaluator's Recommendation: ☐ APPROVE   ☐ DENY   Reason(s) for Denial: Course Evaluator's Signature: _____ Date: _____
Credential Program Coordinator's Recommendation: ☐ APPROVE   ☐ DENY   Program Coordinator's Signature: _____ Date: _____