

REQUEST FOR TRANSFER EQUIVALENCY

Name:				
G#:				
Degree:				
Major:				
Catalog you are us	sing for graduation:			
NON-GV Course	GV EQUIVALENCY	CR HOURS	COMMENTS	
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Approved:				
Αρριονοα.				
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Advisor			Date	
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Department Chair			Date	
-	To Auditor		Date	