okanagan
college

REQUEST FOR COURSE EQUIVALENCY

Note: If you are registered in a course for which equivalence <u>is granted</u>, **withdrawal from the course is <u>not</u> automatic-** you must submit a Course Change/Withdrawal form to the Registrar's Office to be withdrawn.

Student Profile		
Legal Last Name	**Legal First Name**	**Student Number**

Program Information	
Previous OC Program	
Current OC Program	**Term**

Course Information

COURSE(S) COMPLETED			COURSE EQUIVALENCY REQUESTED		DEPARTMENT APPROVAL	
Course Name & No.	Grade	Credit Hours	Course Name & No.	Credit Hours	Yes	No

Student Signature		**Date**
Department Chair Signature	**Department Chair Printed Name**	**Date**

For Office Use Only	
Entered as Equivalence	**Date**