UMBC

Department of Computer Science & Electrical Engineering

COURSE EQUIVALENCY REQUEST FORM
(For Ph.D. Students Only)

To: GRADUATE PROGRAM DIRECTOR
Program: CMPE_____ CMSC _____ ENEE _____

Date _____

Student's Name _____ Email Address _____

I request to transfer the following course(s) taken at _____
                                                                                        (Name of University(s)
to UMBC as follows:

Course Number	UMBC Equivalent

Student Signature _____

Advisor Name _____ Advisor Signature _____

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FOR GRADUATE PROGRAM DIRECTOR'S USE ONLY:

Approved All _____ Approved Partial (Number or Credits approved) _____ Not Approved _____

Graduate Program Director's Signature _____ Date _____

Revised by Keara Fliggins: June 2018