



Office of Admissions • Room 203 North Building • 695 Park Avenue • New York, NY 10065 • 212-396-6048

Undergraduate Course Equivalency Form

For students matriculated Fall 2013 or thereafter

Student's Last Name: _____ First Name: _____ EMPL ID # _____ Temporary/social Security # _____ Leave Blank For Now

The department of Mathematics and Statistics recommends that the following actions be taken on courses being transferred to Hunter College:

Previous College Information	Equivalent at Hunter (Choose one option only)		
College Name, Course Discipline & Number and Course Title from the incoming (previous) college (fill out below)	Course Equivalent at Hunter (indicate Discipline & Number)	Elective (check box)	Departmental Stamp (Required for each course)
College Name: Course Discipline & Number: Course Title:		<input type="checkbox"/>	
College Name: Course Discipline & Number: Course Title:		<input type="checkbox"/>	
College Name: Course Discipline & Number: Course Title:		<input type="checkbox"/>	
College Name: Course Discipline & Number: Course Title:		<input type="checkbox"/>	

Important Notes:

1. Credits will be granted only for the courses listed on the official course evaluation issued by Hunter College, Department of Admissions.
2. The number of credits awarded at Hunter College is based solely on the number of credits which appear on the transcript from the previous college and can not be changed. However, courses from any institute on a quarterly or trimester system will be adjusted accordingly by the staff in the office of Admissions.

Faculty Instructions: Determine and complete the appropriate side of this form. You may determine that a course: (a) is equivalent to a course at Hunter OR (b) can be used for elective credits only. Transfer credit from CUNY colleges is determined by the CUNY Articulation Agreement and can not be modified by individual faculty members. (C) If a course is fulfilling a Pluralism & Diversity category, a Discipline and Course number must also be assigned.

Student Instructions: After the faculty advisor has completed this form, return it to the **ADMISSIONS OFFICE ROOM 203 NORTH BUILDING. PLEASE RETAIN A COPY FOR YOUR RECORD.**

Faculty Name: _____ Signature _____ Title: _____ Date approved: _____