


6RXUFH RI SULRU DSSURYDO IRU XVH RI FUHGLWV HDUQHG

Name Position Date Approval was Granted Evidence of Prior Approval

' H J U H H 6 R X J K W 0

0DQQHU LQ ZKLFK DERYH FRXUVH V ZRXOG ILW LQWR 8/ /DID\HWWH FXUUL

7R WKH EHVW RI P\ NQRZOHGJH WUDQVIHU RI WKHVH FUHGLWV ZLOO EH L  
8QLYHUVLW\ RI /RXLVLDQD DW /DID\HWWH

&/,' \_\_\_\_\_ 6LJQBWXU \_\_\_\_\_

THE FOLLOWING IS TO BE COMPLETED BY THE GRADUATE COORDINATOR OR DEPARTMENT HEAD:

,V WKH LQVWLWXWLRQ DFFUHGLWHG "

'RHV WKH LQVWLWXWLRQ UHJXODUO\ JUDGW JUDGXDWH GHJUHHV "

:DV ZRUN FOHDUO\ OLVWHG DV EHLQJ IRU JUDGXDWH FUHGLWV

:DV JUDGH HDUQHG LQ HDFK FRXUVH % RU EHVWHU

'R FRXUVH V ILW FXUULFXOXP EHLQJ IROORZHG KHUH

To Graduate Coordinator or Department Head  
Please verify equivalent UL Lafayette course. Your  
initials will indicate your approval. If equivalent  
course is not offered, indicate such.

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'HSDUWPHQW +HDG \*UDGXDWH &RRUGLQDWRU 'HDQUDGXDWH 6FKRRO

NOTE: 8QOHVV FOHDUO\ VWDWHG RQ WUDQVFULSW WKDW WKH FRXUVHWRP WKBUH IR  
'HDQ RI \*UDGXDWH 6FKRRO RI VDLG 8QLYHUVLW\ RU D FDWDORJ GHUHSXDSWLRQ WK  
FRXUVH V

'LVWULEXWLRQ 'HSDUWPHQW 6WXGHQW 'DWH \_\_\_\_\_