

Credit for Non-Collegiate Instruction Form

Student Name: _____ EKU ID or SS#: _____ Date: _____

Major: _____ Department: _____ College: _____

MOA Reference Number or name (Required): _____

Name of non-collegiate entity providing the instruction: _____

Please describe the non-collegiate instruction experience for which credit will be awarded. Attach appropriate documentation, such as certificate of completion or similar, along with a verification letter on the letterhead of the non-collegiate entity and signed by the designated authority.

List the equivalences or way the credit will be awarded.

EKU Course Equivalency	Discipline	Level	Credit Hours
<input type="text"/>	OR <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	OR <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	OR <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	OR <input type="text"/>	<input type="text"/>	<input type="text"/>

Student Signature: _____ Date: _____

Chair: _____ Approve Disapprove Date: _____

Dean: _____ Approve Disapprove Refer back Date: _____

Graduate Dean*: _____ Approve Disapprove Refer back Date: _____

Provost/Designee: _____ Approve Disapprove Refer back Date: _____

Comments:

*If necessary

Registrar's Office / Processed By: _____ Date: _____