OSU International Programs Course Equivalency Form

Course Information

Provider: [Name]
Program Country: [Country]

City/Program: [Name]
Overseas University: [Name]
Academic Year: [Year]
Term(S): [Term]

Overseas Course Title: [Title]
English Course Title: [Title]

ECTS Credits: [Credits]
Instructor: [Name]

Level: [Level]
Recommended Credit: [Credit]

Course materials are attached: [Yes/No]

Lecture: [Yes/No]
Laboratory Work: [Yes/No]
Field Study: [Yes/No]
Independent Study: [Yes/No]
Service Learning: [Yes/No]
Seminar: [Yes/No]
Internship: [Yes/No]

Prepared By: [Name]
Prepared Date: [Date]

Academic Department Evaluation (choose one)

DIRECT EQUIVALENCY: Our department has a direct equivalency for this course description. I authorize the following course(s) and credits to be granted.

Course Title: [Title]
Course Number: [Number]
Credits: [Credits]
Department: [Department]

Course Title: [Title]
Course Number: [Number]
Credits: [Credits]
Department: [Department]

Course Title: [Title]
Course Number: [Number]
Credits: [Credits]
Department: [Department]

NO DIRECT EQUIVALENCY: Our department has no direct equivalency for this course description. I authorize the overseas transcripting system to be used.

Under this system, the OSU course number and title would be:

Course Title: [Title]
Course Number: [Number]
Credits: [Credits]

NOT APPROVED: This course is not approved for credit in our department.

Please state the reason(s) this course is not being approved:

[Reason(s)]

Departmental Approval: [Name]
Approval Date: [Date]

Please sign here: [Signature]
Date: [Date]

Please make a copy for your records and return this completed form to: IDEA, University Plaza, Suite 130, OSU Main Campus.