

VISITING STUDENT AUTHORIZATION

A. ELIGIBILITY

NOTE: Students matriculated at William Paterson University must take the last 30 credits of their academic career at William Paterson University

This is to certify	that				
	NAME			SID#	
ls a student in go	ood standing at William Paterson Ur			-	
······	······	NAME OF COLLEGE OR UNI	/ERSITY		
	AI	DDRESS OF COLLEGE OR U	IVERSITY		
B. COURSE EC	QUIVALENCE				
COURSE NO.	COURSE TITLE	NO. OF CREDITS	WPU EQUIVALENT COURSE NO.	INITIAL OF WPU COURSE DEPT. CHAIRPERSON	
	TOTAL CREI	DITS:	••••••••••••••••••••••••••••••••••••••		
during the	SEMESTER	ses	sion		
IN ORDER TO I	RECEIVE TRANSFER CREDIT:				
	GRADUATE students <u>must</u> receive a IATE students <u>must</u> receive a grade o				

An official transcript from the above named College/University <u>must</u> be sent to William Paterson University, Office of the Registrar, P.O. Box 013, Wayne, NJ 07474-0913.

ADVISOR

CHAIRPERSON (of student's major department)

DEAN (of student's major college)