

University of the Philippines  
Diliman, Quezon City

CERTIFICATE OF COURSE EQUIVALENCE

Name of Student	Student Number	Degree Program	Date

The Dean  
College of Science

The have the honor to request for the following course equivalency/ies :

Subject Required	Units	Subject Taken	Semester Taken	Reason

Respectfully Yours,

\_\_\_\_\_

Signature over printed name of student

Recommending Approval :		
_____	_____	
Signature over printed name of Program Adviser	Signature over printed name of Director/Coordinator (where the degree program is offered)	
Recommending Approval :	Recommending Approval :	Action Taken for the Dean :
	EIZADORA T. YU, Ph.D.	Approved ( ) Disapproved ( )
Signature over printed name of Director/Coordinator (subject required)	Signature over printed name of Associate Dean for Mentoring Academic Progress and Advancement	GIOVANNI A. TAPANG, Ph.D. Dean, College of Science