FATIMA COLLEGE OF HEALTH SCIENCES

Students' Services
Courses Equivalency Request Form

For Transferred students from other institutions

Student Details

Name: **ID No:**   **Email:**   **Contact No:**

High School   ☐ **Scientific**   ☐ **Literary**   ☐ **Other: Average** _____%

Name of the Institution   :   <u>**From**</u> **(Academic year)** <u>**To**</u> **(Academic year)**

No. of completed Cr. Hrs.:   **Cumulative GPA ( )**   **Academic Status:**

Desired Program/Major   :   Nursing   Pharmacy   Paramedics   Radiology   Psychology   Physiotherapy

FCHS Academic Year: **Term**   ☐ 1   ☐ 2   ☐ 3

<u>**Student's Signature:**</u> _____   <u>**Date:**</u>

EQUIVALENCY INSTRUCTIONS & POLICY

A student may be granted an equivalency from a prescribed FCHS course if the student can show that she has successfully completed an equivalent course at another recognized academic institution.

HOW IS AN EQUIVALENCY GRADED?

Students will be assigned a grade of TR for transferred courses. The TR grade(s) will not be calculated in the Grade Point Average (G.P.A).

HOW DO I APPLY FOR AN EQUIVALENCY?

1. Register in the course(s) you are applying to for equivalency. This way if your application for equivalency is not granted you will be properly registered in your required courses and attendance will be recorded. Attend all classes <u>until</u> (TR) has been granted.

2. Complete the Course Equivalency Form. Note that the deadline for equivalency applications is the 10th working day from the start of the semester.

3. Ensure that you have signed the equivalency Form.

4. Attach all appropriate supporting documentation that will assist in the evaluation of your application. This would include a copy of a transcript showing the mark(s) obtained for the course(s) you are applying for equivalency, as well as a course description and outline, **Note**: Courses with grades less than **70%** or **C** will not be equated.

5. Submit the completed signed form and its supporting documentation to the **Student Services Department**.

6. The appropriate equivalency committee will evaluate your application. If your application for equivalency is approved, your registration in the course(s) will be changed to reflect a (TR).

7. Make sure that you follow up with your academic advisor or Student Services to determine if an equivalency has been granted or denied.

Courses Equivalency Request Form _updated_ September 2020

Equivalency Committee:

| Conditions are met | ☐ Yes | ☐ No | Committee Member Name/**Signature:** _____ | **Date:** _____ |

Course Details

#	Course Title	Course No.	Cr. Hrs.	Grade	Equivalent Course Title (at FCHS)	Course No.	Cr. Hrs.	Approved (Yes/No)	Approved by related Course Coordinator (Name & Signature)	Fe

Head of Department Approval:

_____   _____
            Signature   Date

Chair of Equivalency Committee Approval:

| **Name/Signature:** _____   **Date:** _____ |

Students Services Manager:

_____   _____
            Signature   Date

Office of the Registrar:

REMARKS: _____

DATE OF PROCESS**:** _____   REGISTRAR _____

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