



**Record of Credit for Prior Work**

*At the time of the student's admission, the department may reduce its requirements if it is satisfied that the student has completed equivalent work.*

Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Graduate Program: \_\_\_\_\_

Degree for which credit will be granted: \_\_\_\_\_

Admit term: \_\_\_\_\_

Description of recognized credit and the Western degree requirements that are being reduced:

**A copy of the student's transcript/s must accompany this form**

Student Signature \_\_\_\_\_ date \_\_\_\_\_

Supervisor Signature \_\_\_\_\_ date \_\_\_\_\_

Graduate Chair Signature \_\_\_\_\_ date \_\_\_\_\_