**COURSE REVALIDATION FORM**

**Revised Fall 2022**

*\*Coursework over five years old for MA/MS and seven years for PhD must be revalidated*

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| Student Name: | |  | | University ID# | | |  |
| Program: | |  | | Date: | | |  |
| **UGS Approval Date/Recorder Initials** | **Course Number** | | **Course Title** | | **Credit Hours** | **Grade** | **Revalidation Method**  **(Include method using key at bottom of page or describe plan that establishes current knowledge of each course.)** |
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| Student Signature: |  | Date: |  |
| **The student has successfully completed all of the requirements set out in the above plan.** | | | |
| Chair of Department or Graduate Advisor Approval: |  | Date: |  |
| UGS Graduate Office Approval: |  | Date: |  |