Full-Time Equivalent Form

Course Abbreviation: ___________________________  *Course Number: ___________________________

*NOTE: Course number must be 195, 295, 395, or 495 for Undergraduate level. Course number must be 595 or 895 for Graduate level.

Certification Statement:
All undergraduate and graduate students enrolling in this course are to be reported full-time even if the student(s) is (are) registering for less than the respective number of full-time credits. The work portion of this off-campus internship or undergraduate co-operative course is equivalent to the academic workload of a full-time student.

This certification will remain in effect until revoked in writing by the college and/or Graduate School (if applicable).

Department Chair or Graduate Program Head: ___________________________ Date: ______________________
(Signature)

College Associate Dean: ___________________________ Date: ______________________
(Signature)

Graduate School Approval: ___________________________ Date: ______________________
(Signature)
(Required for 595 and 895 courses only)

Forward this completed form to: Barbara Barr, Assistant Registrar, Academic Records
Office of the University Registrar
114 Shields Building
University Park, PA 16802

Revised: 6/18/14