Return form to:

College of Graduate Studies & Research

AF 115

Minnesota State University, Mankato

Mankato, MN 56001

Application for Advanced Standing Credit

In a Doctoral Program

|  |  |
| --- | --- |
| Name: | Student Tech ID:  |
| Address:  | E-mail Address: |
| Doctoral Program: | Doctoral Study Start Date at Minnesota State University, Mankato: |

|  |  |  |
| --- | --- | --- |
| **Institution(s) at which the courses were completed** | **Previously completed course(s) for which advanced standing is requested** | **Minnesota State University, Mankato equivalent course(s)** |
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Note: Courses completed on a quarter-hour basis convert at two-thirds to semester hours and only full semester hour units may be applied to graduate programs at Minnesota State University, Mankato.

Advisor signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean of the College
of Graduate Studies and Research \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_