



APPLICATION

Diploma Credit Re-Allocation

Submit to the Teacher Education Office

Student Name: _____

Student No. _____ Date of application _____

Email address _____

In making this application I understand that if approved, the credits for the courses listed will be assigned to requirements for completion of an approved graduate program at UBC, and therefore, may not be considered for completion of the Diploma in Education Program. I also understand that if I wish to apply for graduation from the Diploma in Education Program in the future, additional study will be required within the 5 years from the start of the Diploma program.

PLEASE APPROVE THE FOLLOWING COURSES AND CREDITS TOWARDS GRADUATE STUDIES (Maximum 6)

COURSE NAME	COURSE NO.	UNITS	COURSE TITLE

I understand that if the courses and credits indicated above are approved for inclusion in my graduate program they may not be used to fulfill Diploma in Education requirements. I also understand that the decision to include these courses in my graduate programs must be approved by with the Graduate Advisor for my program and by the Faculty of Graduate Studies.

Student signature; _____

Date received by TEO: _____	Reviewed by: _____
<input type="checkbox"/> Approved <input type="checkbox"/> Not approved	Date recorded on SSC _____
Date sent to Faculty of Graduate Studies _____	