



**Equivalent Graduate Credit
Preliminary Information and
Advance Approval**

PROFESSIONAL OR INSTITUTE COURSES

For detailed information regarding Equivalent Graduate Credit, see Article XI, Professional Compensation H.3 of the Master Agreement. Advance approval not required where only fractional credit could be granted. Submit eight 1 copy of this request to the Chairperson of the Personnel Review Committee.

Applicant _____ Date _____

Department _____

Name and Date of Activity/Institute/Seminar/Workshop _____

1. Describe the professional or institute course you are going to attend (attach copy of brochure).

2. Describe how this experience is relevant to your teaching responsibilities.

3. Is there graduate credit available for this activity through the university or institute that is offering the program? Yes ___ No ___

