



Course Validation Form

Any coursework taken at Anschutz Medical Campus or transferred from another institution that was taken more than seven (7) years prior to applying for candidacy for either a Master's or doctoral degree must be evaluated and deemed current. The validation process is determined by the Director of the student's graduate program.

NOTE: Requires Adobe Acrobat to fill-in and sign

Student Name: _____

Student Number: _____

Degree, Program: _____

Course Number and Title of Course Being Validated: _____

Semester/Year Course was Originally
Taken _____

Date of Validation Exam _____

Time of Validation Exam _____

Description of Exam: _____

Exam Results: ☐ Pass ☐ Fail

Examining Professor(s):

Name: _____	Role: _____	Signature _____
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Name: _____	Role: _____	Signature _____
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Name: _____	Role: _____	Signature _____
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Name: _____	Role: _____	Signature _____
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Graduate School Signature _____