**Students Mobility**

**Courses Equivalency Form**

**Personal Information:**

Student's Name:

Registration #:

Faculty (College):

Department:

Year of the mobility:

Host University/Country

**Equivalent:**

|  |  |
| --- | --- |
| **Host University** | **Home University** |
| Course No. | Course Name | ECTS | Course No. | Course Name | AQU credit Hours |
|  |  |  |  |  |  |
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**Approval:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Name | Signature | Date |
| Student |  |  |  |
| Academic Advisor |  |  |  |
| Department Head  |  |  |  |
| Dean |  |  |  |
| Vice President for Academic Affairs | Prof. Motasem Hamdan |  |  |