**Student Mobility Program**

**Courses Equivalency Form**

**Personal Information:**

Student's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registration #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty (College): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Specialization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Year of the mobility: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Host University/Country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Proposed Study Program abroad:**

|  |  |
| --- | --- |
| **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 |  |  |