CSB | SJU REGISTRAR

Advanced Standing Report

Please make the following entry of Advanced Standing on the official record of:

_____ _____ - _____ - _____

LAST NAME FIRST NAME MIDDLE INITIAL ID NUMBER

Examinations administered: (provide scores) _____

_____

To serve as advanced standing for the following: _____ _____

COURSE NUMBER # CREDITS

APPROVED BY: _____ _____

DEPARTMENT CHAIRPERSON DATE

CSB | SJU REGISTRAR

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