MABALACAT CITY COLLEGE
OFFICE OF THE COLLEGE REGISTRAR

COURSE VALIDATING/CREDITING FORM

PERSONAL INFORMATION			
Last Name	First Name	Middle Name	Extension Name (JR., SR., II, etc.)

ACADEMIC INFORMATION	
Program:	Institute:
Curriculum year level:	Date admitted:
Name and address of the previous institution:	

COURSE/S TAKEN IN SCHOOL/PROGRAM ATTENDED					EQUIVALENT SUBJECT IN MABALACAT CITY COLLEGE		
Course Code	**Descriptive Title**	**Grades**	**Units**	**Semester/A.Y.**	**Course Code**	**Descriptive Title**	**Units**

TERMS AND CONDITIONS

1. The course description and coverage are the same as what is required in the subject offered in college.
2. The number of units are the same or greater than what is required in the course curriculum.
3. In order to graduate with honors **75% of the total credits earned** toward the degree must have been earned in residence at MCC.
4. Courses taken from another school should be credited on the first term of studies at MCC. No other course taken from another school may be credited subsequent to this approval.

I have read and understood the terms and conditions for the crediting of courses and agree to the same.

Name & signature of student Date

IMPORTANT:

1. The student should claim a copy of the approved form (for reference purposes) from the Office of the Institute Dean.
2. This form is deemed valid and official if it bears the signatures of the FoSH, Institute Dean, and College Registrar.

CHECKLIST OF ATTACHMENTS

[ ] **Original or Certified True Copy of Transcript of Records or Certification of Courses Taken**

[ ] **Syllabus/OBTL of the course(s) taken in another school and syllabus/OBTL of the equivalent course(s) in MCC (if necessary)**

APPROVED BY: COLLEGE REGISTRAR	DATE:
RECEIVED BY: FIELD OF STUDY HEAD	DATE:
NOTED BY: INSTITUTE DEAN	DATE:

IMPORTANT: Accomplish this form in triplicate (1 copy for the Registrar, 1 copy for the institute, and 1 copy for the student's file).