



Occupational Specialization Credit Form

Date: _____ Applied to Graduate? Yes No

Student: _____ University ID: _____

Degree: _____ Catalog Year: _____

Major: _____ Concentration (if applicable): _____

Work Experience (1 year = 4 credits):	
	Subtotal Hours:

Occupational/Technical Specialization Training (15 hours = 1 credit):	
	Subtotal Hours:

College	Course Prefix, Number and Title at Transfer School	CH	Articulated? Y/N	College	Course Prefix, Number and Title at Transfer School	CH	Articulated? Y/N

Subtotal Hours:

Total Hours:

Notes:

The purpose of the occupational specialization form is to bring non-traditional credit before the Interdisciplinary Degrees Committee for evaluation. Any use of traditional course credit for block credit may not impact the students' General Education Core or Major requirements regardless of transferring institution.

By submitting this form I am attesting that I have documented the credit based on Guidelines approved by the IDP committee.

Student

BAAS Committee Chair

Academic Advisor

Department Head

Registrar Use Processed By:
_____ Initials
_____ Date