

| Name: | Student ID #: |
|-------|---------------|
| | |

Equivalency Verification Form

If you completed all prerequisite classes at Merced College or your classes are listed on the Grid of Comparable Prerequisite Courses, you <u>do not need</u> to complete this form nor do you need a counselor's signature.

If your course is NOT listed on the Comparable Prerequisite Courses, submit your Official transcript(s) from other colleges/universities directly to the Merced College Admissions & Records office by the deadline posted on the DMS Program website. After your courses have been evaluated, make an appointment with an ALLIED HEALTH Counselor to verify equivalency. Call 209-381-6478 or email ecounselor@mccd.edu to book an appointment.

Fill this form out for the course(s) you need verified for equivalency.

- Write "n/a" for courses shown on your Merced College Transcript.
- Write "n/a" for courses listed on the Grid of Comparable Prerequisite Courses.

| | | | | | | 1 | | |
|--|---------------------|--|-----------------------------------|-----------------|--|--------------|--|--|
| Prerequisite | College/ University | Course Name & Number (ex. BIOL-20) | Course Unit Value | Semester & Year | Counselor Initial verifying equivalency | Course Grade | | |
| ALLH-67 Medical Terminology | | | | | | | | |
| BIOL-16 General Human Anatomy | | | | | | | | |
| BIOL-18 - Principles of Physiology | | | | | | | | |
| ENGL-1A - College Composition & Reading or COMM-1 — Fundamentals of Speech | | | | | | | | |
| MATH-26 or MATH-25 or MATH 15 or MATH-10 | | | | | | | | |
| PHYS-10 – Concepts in Physics or *RADT-13 – Radiologic Sciences (*course is only offered to accepted student in the Merced College Diagnostic Radiologic Technology Program) | | | | | | | | |
| I have read the instructions outlined on this page. My application may be denied pending further department evaluation. Failure to complete & SIGN form will lead to your application being disqualified. | | | | | | | | |
| Applicant Signature: | | | _Date: | | | | | |
| Merced College Allied Health Counselor | | Rationale f | Rationale for temporary approval: | | | | | |
| CID NumberHECCC Nursing Degree AdmMerced College Internal EvaBased on Initial Counselor A | luation on File | | | | Date:_ | | | |