



## ADVANCED STANDING REQUEST FORM

Please review the advanced standing eligibility policies in the Columbia Nursing [Student Handbook](#)  
Students must submit with this request:

- Syllabus of the course you completed (from the year and semester your course was completed)
- An official transcript which includes course and grade received (if not already on file)

First Name:

Last Name:

Columbia E-mail:

Phone Number:

Program:

Specialty:

<b>Course Number and Name</b> of Columbia Course for which you are seeking Advanced Standing	
<b>Below provide information on the course you already completed which you wish to be reviewed for parity</b>	
<b>Name of School</b> the course was taken at	
<b>Semester and year</b> the course was taken(must be within the past 5 years)	
<b>Course Number and Name</b> of already completed course	
What level was this course, undergraduate or graduate?	
Was this course included in a previous degree?	

Student's Signature:

Date: