



CROSS-LISTED COURSES FORM

PLEASE WRITE WITH CAPITAL LETTERS!

Student's family/last name:

.....

Student's first name:

.....

Program (please circle)	HR LLM	HR MA	CCL	IBL
Module (please circle):	2	3	4	5
6				

Name of the course:

.....

Number of credits:

Department/Program:

.....

List the cross-listed courses (if any) you took during the previous modules and number of credits:

1).....
Credits

2).....
Credits

3).....
Credits

Number of credits recognized by Legal Studies Department (only for courses from other departments)*:

.....
Date

.....
Program Chair

*to be filled in by the Program Chair