

Department of Language and Cultures
Application for Recognition of Achievement in
Language / Linguistics / LANC / Linguistics and Languages

Student Name: _					
Student Number: _					
				use and where you can be of it is ready for pick up.)	
Mailing Address: _					
			ss so that your <i>Reco</i> nt you are unable to	ognition of Achievement can pick it up)	
Postal Code: _					
			your regular e-mail a ement is ready for p	address where you can be reach	ned once
	application for	m to you	r instructor for app	have taken and the final grad proval. A copy of your transcri on purposes.	
Language (e.g. FREN) LANC, or Linguistics	Course # (e.g. 1100)	Grade	Term (e.g. Fall 2016)	Name of Instructor	
					<u>-</u>
					_
				Signature:	
Student's Signature:					
Date:				Rayisad: On	otobor 2016