



Parent School Letter

Langston University- _____

_____, OK 7 _____

Date: _____

Secondary School Information

University/College Name: _____

Address: _____

Address: _____

City State Zip Code

_____ is a Chapter _____ student at Langston University- _____
Student First & Last Name

(facility code-11901_____) pursuing a _____
Major (e.g., Biology) & Degree (e.g., BS)

The student intends to take the courses listed below at _____, _____ 20 _____,
University/College Fall/Spring/Sum Year

semester as a guest student. Please certify the courses to the VA as the secondary school.

Course Prefix	Course Number	Title of Course
(e.g.,) MT	1513	College Algebra

The following must be completed by the academic advisor.

The above listed course(s) will satisfy the following requirements:

_____ The course(s) listed above satisfy _____ requirements and will transfer at full value to
Major (e.g., Biology) & Degree (e.g., BS)
Langston University.

_____ The course(s) listed above are not acceptable to satisfy degree requirements for _____ at
Major (e.g., Biology) & Degree (e.g., BS)
Langston University.

Student: _____
Print Name Signature Date

Academic Advisor: _____
Print Name Signature Date

SCO: _____
Print Name Signature Date

SCO Phone: _____ Email: _____

FIND THE LION IN YOU