

TEACHERS COLLEGE, COLUMBIA UNIVERSITY • Office of the Registrar  
**CERTIFICATE OF EQUIVALENCY (COE) FORM**

**Please read the instructions on reverse side before filing!**

---

**TO BE COMPLETED BY THE STUDENT**

NAME \_\_\_\_\_ ID# \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street Address City State Zip

TELEPHONE NUMBER \_\_\_\_\_

ACADEMIC TERM FOR REQUESTED COE (e.g. Spring 2006): \_\_\_\_\_  
(Indicate only one term; for Summer Term, indicate session A, B, or both A&B)

**You must be registered for the term indicated above.**

**No student will be certified for full time or half-time status unless he or she is enrolled for that semester.**

DEGREE PROGRAM: \_\_\_\_\_ MAJOR: \_\_\_\_\_

Total pts. registered for term: \_\_\_\_\_ OR If not enrolled in course work, registered as a (check one):  
Doctoral Candidate (IND6000) \_\_\_\_\_ Master Candidate (IND4000) \_\_\_\_\_

Indicate the number of **hours per week** (not points or credits; see instructions on the reverse side for point equivalents) that will be devoted to one or more of the following activities:

<u>Hours Per Week</u> (No <b>x</b> s or <b>✓</b> s)	<u>Activity</u>
_____	Supervised research on doctoral dissertation
_____	Supervised research/study for the Integrative Experience for Master's Degree (Master's Project or Comprehensive Exam)
_____	Preparation for the required doctoral certification or language exam
_____	Practicum, Student Teaching, Fieldwork or Internship Course(s) <b>(MUST be currently registered in a course defined as such.)</b>
_____	Other (Specify activity – attach additional page if needed) _____

Please sign the following statement:

“The preceding information is correct to the best of my knowledge. I agree to inform the Office of the Registrar of any changes that may occur.”

STUDENT SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

---

**TO BE COMPLETED BY THE ADVISOR**

“The student named above is my advisee, and the information provided above is accurate to the best of my knowledge. All of the work in which the student will be engaged is required for the successful completion of this student's degree program.”

ADVISOR'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Advisor: \_\_\_\_\_ Department: \_\_\_\_\_

---

**TO BE COMPLETED BY THE OFFICE OF THE REGISTRAR**

“According to the information provided above, the student meets eligibility requirements for the following enrollment status.”

FULL TIME                      HALF TIME                      LESS THAN HALF TIME                      \_\_\_\_\_ Initials                      \_\_\_\_\_ Date

TEACHERS COLLEGE, COLUMBIA UNIVERSITY • Office of the Registrar  
**CERTIFICATE OF EQUIVALENCY (COE) FORM**

**Please read all instructions before filing out the reverse side!**

During a term in which the minimum number of points for a desired enrollment status is not maintained, certain “equivalent” activities that are directly related to a student’s degree program may be considered. The acceptable activities are listed on the reverse side of this form. Activities that are not listed must be an integral part of the student’s degree program and must be approved by the advisor and the Registrar’s Office. Those who have graduated and are not admitted to a second degree program and non-degree students are not eligible.

If you are enrolled in dissertation advisement or dissertation defense (all 8900 courses, CCPX 6430, CCPJ 6460, or HBSK 6480), you are considered full time and do not need to file a COE.

The properly completed COE, certified by the student’s advisor, must be filed with the Office of the Registrar where it will be subject to final approval. The burden of proof and the responsibility of the academic program lies with the student’s academic department.

COE’s can only be accepted for degree students who are registered in some form, and only during the current term.

**INSTRUCTIONS FOR FILING THE CERTIFICATE OF EQUIVALENCY**

1. COE’s must be filed with the Office of the Registrar, 324 Thorndike, as soon as possible after registration and are due no later than the close of the change of program period.
2. COE’s can only be processed for the current term except under extenuating circumstances; in such case, the COE must be submitted to the Registrar’s Office for processing.
3. The form must be signed by both the student and the major advisor.
4. The number of hours spent weekly is converted to point equivalents at the rate of:
  - a) 1 point for every 3 hours for the Autumn and Spring terms
  - b) 1 point for every 7.5 hours for a single Summer session (A or B)
  - c) 1 point for every 3.75 hours for an activity that encompasses both Summer sessions.The point equivalent is then added to the number of points for which a student is registered to determine the final equivalent status.

FULL-TIME status is defined as 12 points or more during each academic term. HALF-TIME status is defined as 6 – 11 points for each academic term.
-----------------------------------------------------------------------------------------------------------------------------------------------------

**IMPROPERLY COMPLETED COE’S CANNOT BE PROCESSED!**