



<p><b>Kean University</b> Center for Veteran Student Success CAS 208 1000 Morris Ave, Union, NJ 07083</p>	<p><b>Parent Institution Letter</b> Kean University CVSS will only authorize courses that will fill degree requirements. You must be accepted to Kean University for the requested semester and have an Official degree plan on file</p>
---	--

**PART I: Complete by Student**

**Name (Last, First, MI)**

---

---

**Kean ID**

---

**Mailing Address**

---

---

---

**Phone Number**

---

**Chapter Benefit**

---

**Name of Degree/Program**

---

**Name/Address of Secondary Institution**

---

---

---

**Semester Attending 2nd Institution**

---

**Courses at Secondary Institution**

	<b>Course Name</b>	<b>Course Number</b>
<b>1</b>		
<b>2</b>		
<b>3</b>		
<b>4</b>		
<b>5</b>		

**Student Signature**

**Date**

\_\_\_\_\_

**PART II: Complete by Kean University Center for Veteran Student Success**

**Approved Credit Hours** \_\_\_\_\_

**P** \_\_\_\_\_

**F** \_\_\_\_\_

**Facility Code**

\_\_\_\_\_

\_\_\_\_\_

**Courses Equivalent to Kean University**

	<b>Course Name</b>	<b>Course Number</b>
<b>1</b>		
<b>2</b>		
<b>3</b>		
<b>4</b>		
<b>5</b>		

**Kean University COO Signature**

**Date**

\_\_\_\_\_

\_\_\_\_\_