

# HARRIMAN INSTITUTE CERTIFICATE AUDIT FORM

Please submit this form **with official transcript** to:

Rebecca Dalton  
Harriman Institute, MC 3345  
Room 1211

You will receive an email confirmation upon receipt.

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Name: \_\_\_\_\_ UNI: \_\_\_\_\_  
School: \_\_\_\_\_ Department: \_\_\_\_\_  
Beginning Semester at CU: Fall / Spring \_\_\_\_\_ Anticipated Semester of Graduation: Fall / Spring \_\_\_\_\_

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## REGIONAL LANGUAGES

Language: \_\_\_\_\_ Native / Placement Test / Course: \_\_\_\_\_ Grade: \_\_\_\_\_

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## REGIONAL COURSES

*Please see Program Guide for course distribution requirements.*

<u>Course Title</u>	<u>Department</u>	<u>Course Number</u>	<u>Grade</u>
Legacies of Empire and the Former Soviet Union	REGN	U8445	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Credit Points: \_\_\_\_\_ (*must total 20*)

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## CERTIFICATE ESSAY

Topic: \_\_\_\_\_ Reader: \_\_\_\_\_

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Institute Approval: \_\_\_\_\_ Date: \_\_\_\_\_