



# Request for Reciprocity Verification

Dean's Office, 202 Life Sciences (530) 752-0410

Reciprocity verification assesses the courses taken for completion of requirements for UC Davis.

Please check one or more requirements needed for verification:

- General Education
- English Composition
- Other (please indicate) \_\_\_\_\_

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Major(s): \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please send verification to:**

School: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_