Certification for Regular Master Courses

Student ID No.： Name： Date:

Total Credits Earned:\_\_\_\_\_\_\_

Please fill in courses you have got course credits during the period of graduate study **(Exempt courses and current study courses should be listed.)**

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| --- | --- | --- | --- | --- |
|  | Course No. | Course Name | Score | Credits |
| Core courses | For example-TM6320701 | New Business Development | 3 | 90 |
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| Others |  |  |  |  |
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Advisor： Chairman： (Note: Attach Certified Transcript)