



# Defense Acquisition University Course/Equivalent Product Review Request

## 1. Organization's Name:

## 2. Organization's Point of Contact:

Name:

Work Phone and ext:

Mobile Phone:

Fax:

E-mail:

Mailing Address:

## 3. Equivalent Product to DAU Course Relationship

\_\_\_\_\_ One-to-one (equivalent product to DAU course)

\_\_\_\_\_ Many-to-one (several equivalent products to one DAU course)

\_\_\_\_\_ One-to-many (equivalent product to many DAU courses)

## 4. DAU Course Identifier and Name

Identifier	Name

## 5. Equivalent Product Identifier, Name, and Implementation Date

Identifier	Name	Implementation Dates	
		Start (mmddyy)	End (mmddyy)