

**CREDIT BY EXAMINATION FORM**

**1. Student and Course Information with Approval:**

**Student Name** \_\_\_\_\_ **P Number** \_\_\_\_\_

**Grade Point Average** \_\_\_\_\_ (cumulative GPA must be 2.5 or better)

has approval to take credit by exam for the following course:

**Course Number and Title** \_\_\_\_\_

\_\_\_\_\_  
Department Dean \_\_\_\_\_ Date \_\_\_\_\_

**2. Signatures of examination evaluators:**

\_\_\_\_\_  
Name \_\_\_\_\_ Department \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Name \_\_\_\_\_ Department \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Name \_\_\_\_\_ Department \_\_\_\_\_ Date \_\_\_\_\_

**3. Recommendation to Vice President of Academic Affairs**

**Name** \_\_\_\_\_ **P Number** \_\_\_\_\_

has completed the attached examination for credit in this course (syllabus attached):

**Course Number and Title** \_\_\_\_\_

Date of exam \_\_\_\_\_

Grade PASS \_\_\_\_\_ Fail \_\_\_\_\_

Recommendation Credit \_\_\_\_\_ No Credit \_\_\_\_\_

\_\_\_\_\_  
Department Dean \_\_\_\_\_ Date \_\_\_\_\_

**4. Instructions to Records office:**

Credit is: Granted \_\_\_\_\_ Denied \_\_\_\_\_

Completed examination and syllabus for course are attached.

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Vice President of Academic Affairs

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Date

**5. Records office functions:**

\_\_\_\_\_ **Student has paid \$25 fee.**

\_\_\_\_\_ **Student is informed of result.**

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Records Office Staff

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Date