CREDIT BY PROFICIENCY EXAM FORM

OFFICE OF THE REGISTRAR

H# ___________________________ Student Name: _____________________________________ Term: __________

Major: ___________________________________________________________________________________________

To arrange to take a Credit by Proficiency exam or for more information, please contact the Department Chair of the
discipline you choose to complete the exam (for example, if you choose to test out of math you would contact the Chair of
the Math Department). You are not permitted to take the exam for any course you have previously audited, failed or have
an outstanding “I” (Incomplete).

The Credit by Proficiency appears as credit hours earned, no grade is assigned for GPA calculation, and the course may
not transfer to another higher education institution. Credits by Proficiency cannot exceed 25% of the total credits required
for graduation.

Course(s):

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Department Chair Signature: __________________________________________________________________________ Date __________

Student Signature: _________________________________________________________________________________ Date __________

A $40 fee must be paid to Student Accounts prior to signing up for the exam.
Date of Payment: _______________ Receipt #: _______________ Authorization: ________________________________

Upon completion of the exam, your score will be forwarded to the Registrar’s Office. If a numerical grade of 75 or higher is
achieved, credit for the course will be added to your transcript. Score: __________ Pass [ ] Fail [ ]

Test Graded by: ___________________________________________________________________________________

Updated 9/17/19 hmh

REGISTRAR’S OFFICE USE: ___________________________ DATE: ______________