	SOLANO COMMU	INITY COLLEGE	PETITION F	OR CREDIT I	BY EXAMINA	ATION
NAME						
	Last	First	М	-	SCCID#	
ADDRESS			DATE OF BIRT	гн		<u> </u>
7.2211.200			_			
CITY		STATE	=	ZIP CODE		
Ciri			=	- 217 CODE		
0						Helt Males
Course in	which examination is req	uestea				Unit Value
					=	
SIGNATURE O	F STUDENT		Date			Major
					T	
PREREQUISITE	E CHECK	DIVISION / DE	PARTMENTAL	ACTION		
The etudent	ia/ ia mat avvaliti		a training and a	vmoriones The		have been
The student is/ is not qualified through previous training and experience. The prerequisites have been met/waived Request approved Request denied for the following reason(s):						
met	_/waived Request a	approved Re	equest denied fo	or the following	g reason(s):	
	Division Dean Signature		Date			
		FOR OFFICE	LISE ONLY			
EL ICIDII ITV DI	ETERMINATION	TOROTTICE	OSE ONE!			
					V	11.
	it currently enrolled?	_				How many units?
	dent have a 2.0 GPA or bet				Yes	No
C. Has the stud	lent completed a minimum of	of 12 units at SCC				
or will have o	completed 12 units during the	e current semester a	at SCC?		Yes	No
D. The student	has earned	units by Cred	lit by			
Examination	(15 unit maximum.)					
	,					
According to the records in Admissions and Describe the service being shallowed the got them.						
According to the records in Admissions and Records, the course being challenged has not been taken for credit or previously failed. I certify the above statements are true.						
	for credit or previou	usiy falled. Teertify	the above state	ements are true) ,	
			_			
	Director of Admissions a	and Records		Date		
EXAMINATION						
RESULTS				GRADE		
	Course Title		Units	-	P/NP Only	,
	Cimatus of Familia			_	Data	
	Signature of Examiner				Date	
				_		
	Signature of Division De	an			Date	<u>—</u>
POSTING						
TO RECORDS						
10 NECOKDS		minalana Office Ot		_	Data Daata '	
	Adı	missions Office Sig	mature		Date Posted	