

Challenge for Credit Application
Registrar's Office Halifax NS B3M 2J6 (902) 457-6117 FAX (902) 457-6498 registration@msvu.ca

| Please complete the for | m and submit to the Regis | trar's Office for per | mission to challenge a course for credit. |
|----------------------------------|-----------------------------|-----------------------|--|
| ☐ Approval from the Dep | partment Chair must be ol | otained prior to subr | nitting this form to the Registrar's Office. |
| ☐ You must attach an o | utline of your knowledge o | r skills which you fe | el justify the following challenge. |
| | | | |
| Object ID // | Last Name | | First Name (a) |
| Student ID# | Last Name | | First Name(s) |
| Program of Study | () Phone Number | Mount Email A | Address |
| I, the undersigned, am a | applying for permission to | challenge the follow | ing course for credit: |
| | | | |
| Mount Course Informa | ation | | |
| | | | |
| Course Number (ie. BUSI | 1112) Course | Title | |
| | | | |
| Department Chair Appro | oval | | |
| | | . <u></u> | |
| Date | | Departme | ent Chair's Signature |
| The tuition fee to challe | nge a course is one-half of | the normal tuition | rate for the course (non-refundable). |
| The fee is paid before yo | ou write the exam or comp | lete the work requir | ed by the Department. |
| Students must achieve | a minimum grade of C in c | order to receive cred | ults of the challenge will be recorded on the transcript. it for a course. Where the challenge grade is C or |
| | | | notation of NC (no credit) is recorded. |
| If your application is app | proved, you will be advised | by the Registrar's (| Office of how to proceed. |
| | | | ************************************** |
| Date | Date Student Signature | | |
| OFFICE USE ONLY | | | |
| Approval Granted ☐Yes | s □ No Approval Da | te: | Approved By: |
| | Registration | Date: | Registered By: |