

Please complete the form and submit to the Registrar's Office for permission to challenge a course for credit.

Approval from the Department Chair must be obtained prior to submitting this form to the Registrar's Office.

□ You must attach an outline of your knowledge or skills which you feel justify the following challenge.

Student ID#	Last Name/Surname	First Name(s)/Given Name(s)
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Program of Study	Phone Number	Mount Email Address
I, the undersigned, am ap	oplying for permission to c	challenge the following course for credit:
Mount Course Informa	tion	
Course Number (ie. BUSI 2	L112) Course	Title
Department Chair Approv	val	
Date		Department Chair's Signature
The tuition fee to challen	ge a course is one-half of	the normal tuition rate for the course (non-refundable).
The fee is paid before you	u write the exam or compl	lete the work required by the Department.
Students must achieve a	minimum grade of C in o	course, and the results of the challenge will be recorded on the transcript. rder to receive credit for a course. Where the challenge grade is C or ade is C- or lower, a notation of NC (no credit) is recorded.
If your application is appr	oved, you will be advised	by the Registrar's Office of how to proceed.
Date		Student Signature
OFFICE USE ONLY		
Approval Granted Deve	□No Approval Dat	e: Approved By:
	Registration	Date: Registered By: