Guidelines for Credit By Exams

Students may receive credit through nationally recognized professional licenses or certificates gained through examinations. Students must be able to provide the original certification document and examples of the curriculum for the certification. The student must verify the certification through his/her Department Faculty and the Registrar’s Office. If curriculum and certification cannot be verified, the student may be able to show competencies through the challenge process. Please see the Challenge Policy for more information.

A student will receive a grade of “EC” for any credits awarded through CLEP/AP/CBE. The total credits awarded for CLEP/AP/CBE for a student cannot exceed 25% of the credits required for his/her degree.

The original copy of the certification must be provided to the Department Faculty in order to receive credit. All originals will be returned to the student. A copy of certification/license must be attached to form.

Course student is requesting credit:

Course Prefix: __________ Course Number: __________ Credits: __________

Course Title: ______________________________________________________________

Description of training received: ______________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

Student Signature: ___________________________ Date: ________________

The following must be completed by the Department Faculty:

Title of certification/license approved for course: ________________________________

Agency approved for certification/license: ________________________________________

Department Faculty Signature: ___________________________ Date: ________________

For Office Use Only

Date Received: Approved: Denied: Date Posted/Letter Sent:

1115 North Roberts Street, Helena, MT  59601   (406) 447-6900   www.HelenaCollege.edu

DATE PROCESSED: ___________ INITIALS: ___________ Updated: 11/19/2020