

**Student Information**

Student ID Number \_\_\_\_\_ Student Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Program of Study \_\_\_\_\_ Advisor \_\_\_\_\_

Current Semester: Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Year: \_\_\_\_\_

**Challenge Information**

Course Number \_\_\_\_\_ Course Title \_\_\_\_\_ Credit Per Course \_\_\_\_\_

Please read and initial the following items:

\_\_\_\_\_ I understand there is a \$100 fee for the challenge exam (paid prior to taking the exam.)

\_\_\_\_\_ I understand that Financial Aid will not support or cover challenged courses.

\_\_\_\_\_ I understand a grade of "CH" will be awarded and I will not accrue GPA points for the course.

\_\_\_\_\_ I understand the exam must be completed with passage of at least 80% of the exam contents (written, oral and/or hands-on content) in order to receive credit for the course.

**Signatures (Due prior to taking the exam)**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty/Testing Officer: \_\_\_\_\_ Date: \_\_\_\_\_

**Routing after exam:**

Grade Received: \_\_\_\_\_ Faculty/Testing Officer: \_\_\_\_\_

Division Director: \_\_\_\_\_ Date: \_\_\_\_\_

Registrar: \_\_\_\_\_ Date: \_\_\_\_\_