

## Credit By Examination

CITY COLLEGE					
Student Information					
Name Last	Fire	ot .			MI
Address					IVII
iddiess		City		State	Zip
VIKING ID#	Email				
Birthdate	Telephone				
Student Signature		Date			
udent is responsible for submitti	ng this form and follow	ing up with the	department r	epresentati	ve.
the Credit by Examination cours xamination score will not be used				itution, the	Credit by
Student Academic Status				LBCC	C Office Use On
Currently Enrolled? Yes/No	Probation or Dismiss	val2 Vas/Na	Units at LBC	TC.	
Currently Enroned: 1 es/10	Trobation of Dishins	oai: 1 es/140	Units at LDC	<u> </u>	
Academic Administrative Assistant Signa	ature Date				
Department Review				LBC	C Office Use O
Course Number and Title				Units	
Recommend/Not Recommended	Approved/Disapp	rovea	12 unit Excep	ouon Approv	ved/Disapprove
Department Head Signature	Instructional Dean Sig	nature	V.P. Academ	nic Affairs Sign	ature
If approved, student must submit the current fees per credit unit.	fees to the Cashier's Off	ice prior to takin	g exam. Credi	t by Examin	ation fees are
Cashier's Office				LBCC	C Office Use On
Amount Paid	Staff Initial	Date	Receipt No.		
Exam Results				LBCC	C Office Use O
The exam was conducted by		Grade	Units	Exam D	ate
The exam was conducted by		Oracc	Omts	LAGIII D	a.c
Department Head Signature	Instructional Dean	Signature			
Academic Department must for	ward exam results to E	Records Office			
readenne Department must for	maru Caum I Counts to F	Coords Office		L	BCC Office Use Or
		Stude	nt Notified		
Records Office Use Only: Grade	Entered		Initial		

Date \_