

**SOUTHERN WEST VIRGINIA COMMUNITY AND TECHNICAL COLLEGE  
BOARD OF GOVERNORS  
SCP-3201.A**

**SUBJECT:** Challenge Examination Request Form  
**REFERENCE:** SCP-3201, *Challenging a Course/Credit by Examination*  
**EFFECTIVE:** January 12, 2018  
**REVIEWED:** August 2017

**PART A: TO BE COMPLETED BY THE STUDENT**

Student: \_\_\_\_\_ ID: \_\_\_\_\_

Request credit in \_\_\_\_\_ for \_\_\_\_\_ credit hours.

If challenge exam taken previously, so indicate:  Yes  No If yes, when? \_\_\_\_\_

If course taken previously, so indicate:  Yes  No If yes, when? \_\_\_\_\_ Grade assigned \_\_\_\_\_

If currently enrolled in course, so indicate:  Yes  No

**PART B: TO BE COMPLETED BY THE SCHOOL CHAIR**

School Chair \_\_\_\_\_ Date(s) of consultation with student \_\_\_\_\_

Student is eligible for challenge examination:  Yes  No If no, explain \_\_\_\_\_

\_\_\_\_\_  
Faculty to perform evaluation: \_\_\_\_\_

Contact information: Campus \_\_\_\_\_ Phone \_\_\_\_\_ E-mail address \_\_\_\_\_

\*Required signature: \_\_\_\_\_  
School Chair Date

1. No student may take the Challenge Examination for a course more than once.
2. No student may take the Challenge Examination for a course for which he/she has received a grade other than W or AU.
3. No student may take the Challenge Examination for a course in which he/she is currently enrolled.
4. If credit is recommended, the grade assigned for the course will be CR. If not recommended for credit, no grade will be assigned.
5. A non-refundable fee per credit hour is assessed for this service prior to taking the examination. (This fee is not included in the College's tuition).
6. Challenge examinations are not included in the calculation of a student's instructional load as applied to financial aid programs at the College.
7. If planning to transfer to another institution, the student should consult the receiving institution concerning transferability of credit by Challenge Examination.
8. Parts A, B, and C must be completed prior to the administration of the challenge examination

**PART C: TO BE COMPLETED BY THE BUSINESS OFFICE**

Upon payment, the student is to return this form to the School Chair for required signature.

<p><b>FOR OFFICE USE ONLY</b></p> <p>\$ _____ Fee Received   <input type="checkbox"/> Cash   <input type="checkbox"/> Check</p> <p><b>Date of Payment:</b> _____</p> <p><b>Card:</b>   <input type="checkbox"/> VISA   <input type="checkbox"/> M/C <input type="checkbox"/> Other: _____</p> <p><b>Card #:</b> _____</p> <p><b>Expiration Date:</b> _____</p>
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\*This form is filed in the student's file in the Records Office.

**SOUTHERN WEST VIRGINIA COMMUNITY AND TECHNICAL COLLEGE  
BOARD OF GOVERNORS  
SCP-3201.B**

**SUBJECT:** Challenge Examination Results Form  
**REFERENCE:** SCP-3201, *Challenging a Course/Credit by Examination*  
**EFFECTIVE:** January 12, 2018  
**REVIEWED:** August 2017

**PART A: TO BE COMPLETED BY THE SCHOOL CHAIR**

Student: \_\_\_\_\_ ID: \_\_\_\_\_

Request credit in \_\_\_\_\_ for \_\_\_\_\_ credit hours.

School Chair \_\_\_\_\_

Dates(s) of consultation with student \_\_\_\_\_

Student is eligible for challenge examination:  Yes  No If no, explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**PART B: TO BE COMPLETED BY THE FACULTY**

Date on which contact was initiated by student: \_\_\_\_\_

Evaluation by: \_\_\_\_\_  
Faculty Member Date of Evaluation

Attach this form to the student's exam along with a narrative describing the evaluative process.

Minimum score required for passing: \_\_\_\_\_ Student's exam score: \_\_\_\_\_

Recommended for credit:  Yes  No If yes, number of credit hours: \_\_\_\_\_

Faculty Signature: \_\_\_\_\_ Date \_\_\_\_\_

**PART C: POST-EVALUATIVE REQUIRED SIGNATURES**

Approved by: \_\_\_\_\_  
School Chair Date

Approved by: \_\_\_\_\_  
Chief Academic Officer Date

Approved by: \_\_\_\_\_

Registrar

Date