

PREREQUISITE/COREQUISITE CHALLENGE PROCESS

1. Complete this form and attach documentation to establish your right to challenge this prerequisite/corequisite request. (Examples of documentation: official or unofficial high school and/or college transcripts, international transcripts, certificates, test scores and etc.)
 - a. Identify the course in which you wish to register and the prerequisite/corequisite you wish to challenge.
 - b. If you are attempting to use high school coursework to meet college course prerequisite, attach a copy of your high school transcript to verify the coursework completed.
 - c. If you are trying to challenge a math course, you **must** submit a copy of your assessment test results along with your transcripts and the challenge form.
2. Meet with a counselor in the Counseling Department to assess whether you will benefit from the challenge process.
 - a. The counselor will sign the form.
 - b. The Counseling Department Designee in the Counseling Department will enter the prerequisite/corequisite course within 24 business hours. This will allow you to register in the course.
3. Register during your registration period. (*Refer to Class Schedule for the last day to add*)
4. The Counseling Department Designee will submit the Prerequisite/Corequisite Challenge form with documentation to the referral area – school/department indicated on the form.
5. The department coordinator will resolve the challenge within three (3) working days.
6. The Counseling Department Designee will notify you by phone if the challenge is denied and mail the denied challenge form back to you.***
7. On approved challenge decisions, you will be notified by mail. You will be allowed to stay in the class.

*****For Denied Decisions**

1. Counseling Department Designee will remove the prerequisite/corequisite course entered.
2. Admissions Office will drop you from the class. You will qualify for a refund.
3. Cashier's Office will process the refund.
 - a. If you paid by credit card, your credit card account will be credited.
 - b. If you paid by check or cash, please allow 4 to 6 weeks to receive a refund check by mail.
4. If you wish to appeal the decision, you may do so by contacting the dean in the school/department for the course you are challenging.

PREREQUISITE/COREQUISITE CHALLENGE

Form will be processed within 24 hours

Registering Term: Summer Fall Spring Student ID#: _____

Name: _____ Birthdate: _____
LAST FIRST MI

Street Address: _____ City: _____ Zip Code: _____
NUMBER STREET NAME APT #

Home Phone #: (____) _____ Cell Phone #: (____) _____ E-mail: _____

Title of course you wish to enroll: _____
Course Name and Number

The prerequisite/corequisite is/are: _____
Course Name and Number

Supporting Documentation:

Must be attached

Unofficial Documents Used

I am challenging the prerequisite and/or corequisite for the following reason:

- 1. Knowledge or ability to succeed. Based on having the knowledge or ability to succeed in the course (please explain below, i.e., work experience) despite not meeting the prerequisite.
- 2. Prerequisite not validated. The prerequisite is not in accordance with District's process for establishing prerequisites.
- 3. Prerequisite is discriminatory or applied in a discriminatory manner.
- 4. Prerequisite course not available. If a prerequisite for a course necessary for graduation, transfer or a certificate is not reasonably available and causes undue delay in attaining educational goal.
- 5. Not required due to external regulations

All challenges will be reviewed within (3) working days.

It is the responsibility of the student to provide compelling evidence to support this challenge. Please explain your request in detail and attach supporting documentation. If you need more room, please attach additional sheet.

Student Signature: _____ Date: _____

Counselor Signature: _____ School Referral: _____

Counseling Designee Signature: _____ Posted Date: _____

SCHOOL/DEPARTMENT REFERRAL ONLY

Date Received: _____ Department Staff: _____

Documentation has been evaluated and the challenge is: Approved Denied

Comments: _____

Authorized Signature(s) - Dept Coordinator/Designee: _____ Date: _____

DENIAL AREA ONLY

COUNSELING DEPARTMENT: Date the student was notified: _____ Counseling Designee: _____

Date of Removal of Prereq/Coreq: _____ Counseling Designee: _____ Enrolled in Course: _____

ADMISSIONS & RECORDS OFFICE: Course Drop Date: _____ A/R Staff: _____