

PETITION FOR CREDIT BY EXAMINATION

CALIFORNIA STATE UNIVERSITY, DOMINGUEZ HILLS – SCHOOL OF NURSING

PART I- TO BE COMPLETED BY STUDENT (PLEASE PRINT)

Student ID Number Last Name First Name

Email Home Phone Work or Cell Number

Home Address

Select one:

- CA State & Local Gov Only
POL 101

Content Credit Only

- checkbox
checkbox

or

Unit Credit

- not applicable
checkbox

Select one:

- Traditional letter grade: A-F available for GE courses only
Credit/No credit

I have read the conditions and limitations applicable, understand them and agree to abide by them.

Signature

Date

STUDENT: Send completed form to the School of Nursing for processing

MAIL CSUDH, School of Nursing
1000 E. Victoria Street
Carson, CA 90747

FAX (310) 516-3542

PART II- TO BE COMPLETED BY SCHOOL OF NURSING

Petition for Credit by Examination:

Approved

Not approved because:

- Student not eligible to enroll in course
Student must meet with advisor before registering for exam
Other (Please specify)

Signature, Department Chairperson

Date

Part III- TO BE COMPLETED BY CHAIRPERSON: Complete steps 1-3 below. Send a copy of the completed form to Admissions and Records and another to the School of Nursing. A & R will provide the student with a copy.

1. Examination scheduled for Date Location

2. a. Date Examination Graded Grade Earned

b. Instructor's Signature