CHALLENGE EXAMINATION REQUEST

The college recognizes that students accumulate a great deal of information outside the classroom without formal instruction. There are times when this information may be extensive enough to satisfy course requirements. With approvals, a student may be allowed to take challenge examinations. Information on policies regarding challenge examinations may be found at https://wnc.edu/admissions/transfer-information.php, under Challenge Examinations.

Instructions:
Students should first view the policies associated with challenge examinations. Students who believe they might qualify should then speak with a full-time instructor who teaches classes in the applicable discipline. If no full-time instructor is available, a part-time instructor may be authorized to offer an exam with the approval of a full-time instructor or Division Director.

The instructor must approve offering a challenge examination; there is no requirement on the part of WNC to offer a challenge examination upon request.

If instructor approval is obtained, students must then get permission from the Director of Admissions and Records to ensure that WNC policies allow the student to take the exam. If approvals are granted and recorded on this form, the student should pay the $25 non-refundable Challenge Exam fee to the business office and submit this form with their payment receipt to Admissions and Records.

Admissions and Records will forward the form to the instructor. The instructor is to give the exam, record the results on the form, and return to Admissions and Records with a copy of the challenge exam. The student is not allowed to handle the form with the results/test attached.

To be completed by STUDENT:

Name: ___________________________ Student ID Number: ___________ Phone: _____________________

Colleges attended previously: ___________________________________________________________________

Prefix/number of course requested to challenge: (example: ENG 101): ___________________________________

Credits _____ Instructor/Proctor of exam: ___________________________________________________________________

Why challenge exam is requested: ___________________________________________________________________

I certify under penalty of perjury that the above information is true, accurate and complete. I understand the intentional falsification of information on this document is cause for the revocation of any challenge examination credit awarded.

Signature: ___________________________ Date: _____________________

To be completed by INSTRUCTOR:

Name: ___________________________ Full-time _____ Adjunct _____

Approved: _____ Disapproved_____ Signature: ___________________________ Date: _____________________

If adjunct faculty, approval from full-time instructor in discipline or Academic Director is required:

Name of full-time instructor or director: ___________________________ Approved ___ Disapproved: _____

Signature: ___________________________ Date: _____________________

NOTE: Instructor may not give exam until all approvals and payment is received. Instructor must wait until form is returned to the instructor by Admissions and Records.
To be completed by Director of Admissions and Records

Approved: _____ Signature: __________________________________________ Approval valid until ________________

Denied: _____ Reason: _____________________________________________________________________________

Payment received by student: _________________ Date Sent to Instructor: ________________________________

To be completed by Instructor: Challenge Examination Results

Date of Test: __________ Grade –pass or fail: __________

Signature: __________________________________________ Date: __________________________

Instructor must submit this form with a copy of the exam to Admissions and Records. The student may NOT handle this form after the exam has been administered. An oral/skills examination must be approved in advance with the Director of Admissions and Records.

For office use only:

Received by instructor: ________________

Approved _____ Not Approved _____ Processed by _____ Date_______________