

Instructions

1. Complete the student portion of the form.
2. Request the approval of the instructor.
3. File the form with your college Academic Advising Office, no later than the end of instruction.
4. **A \$5.00 processing fee will be billed to your account.**

Student

Name			PID
Current address			Email
City	State	Local phone number	
Major(s)	College	Class level	
Department and course number	Grade Option	Letter	Pass/Not Pass
Name of Instructor	Requested date of examination		
Reason for requesting credit by examination			

Instructor – signature indicates approval

Preparation for Examination: books read, exercises written, project completed, work with faculty, etc.

Instructor’s Signature	Date of Examination	Date Approved
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College Academic Advising Office

College Academic Advising Office - please send form to the Registrar’s Office academicrecords@ucsd.edu or mail code: 0022

Approved by	Date
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Registrar

Processed by	Date
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