

## Departmental Validation & Credit-by-Exam Form

### STUDENT

\_\_\_\_\_  
 Student's Name                                      ID Number                                      Email Address

\_\_\_\_\_  
 Course Number                                      Course Title                                      Number of Credits Requested

*I have discussed this application with my academic advisor and agree to pay the fees for (pick 1):*  
 Credit by examination \_\_\_    OR    Certification & training validation \_\_\_

\_\_\_\_\_  
 Student's Signature                                      Date                                      Major

### FACULTY EVALUATOR

\_\_\_ Evidence of 75% or more of outcomes learned. # credits approved: \_\_\_\_\_ with S/P grade  
 \_\_\_ Evidence of less than 75% of outcomes learned. May student resubmit? Y/N \_\_\_\_\_

*Note outcomes clearly documented, the assessment method and what evidence was reviewed.*

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

### APPROVALS Student or academic advisor sends form to department chair. Please send on to next department.

\_\_\_\_\_  
 1. Evaluator *(if not chair)*                                      Date                                      4. Records *(grades@andrews.edu)*                                      Date

\_\_\_\_\_  
 2. Department Chair                                      Date                                      5. Accounts Payable                                      Date  
*(If credit towards major or off-campus course)*

\_\_\_\_\_  
 3. College/School Dean                                      Date

*Allow 30 days for approvals and entries.*

### FEES

Department fills in. Accounts Payable checks. Rates 2020/8-2021/7

(EN15) Recording fee (\$50 per credit; SDATS: \$50 recording +\$50 assess CPL per credit)	\$ _____
(EAXR____) Department administrative fee (\$45 per challenge exam; \$0 validation)	\$ _____
(_____) External exam fee: _____	\$ _____
<b>Total charged to student account:</b>	<b>\$ _____</b>