

SAMPLE COURSE CREDIT BY EXAMINATION APPLICATION

First name: FIRST NAME		Last name: LAST NAME		
Field of Study:FIELD OF STUDY		BGSU ID: 1234567890		
Planned Exam Date: 01/01/2020		Planned Graduation Date: May 2020		
A n	naximum of six hours of grad	duate credit may be taken i	by examination.	
SUBJECT	1234	COURSE NAME	0	2020
Subject (ex: BIOL)	Catalog #	Course Name	Credit Hrs.	Term/Year
Reason for requesting credit by examination: Provide evidence here Evidence of previous study and/or previous experience that allow me to take the examination.				
A fee oj	f \$80 must be paid before su	ıbmitting the application. T	o pay, use CashNet:	
-	123456789 Transaction #	01/01/2020 Date		
This signed form represents my for allow me to take the examination of better must be obtained for my receive a grown and the samination for credit receive a grown and the samination	appear above. I understand that to ord to be credited with an "S" for	the regular class standards will	be applied to the examinat	ion and that a "B" or
Graduate Coordinator Approx	val: Graduate Coordinator	Signature Here		
The signature of the graduate appropriate policies and proce	. •	tes that the credit by exam	request has been appr	oved and
Line College Approval: Line	College Signature Here			
The approval of the Associate policies and procedures have b		lit by exam request has bee	en approved and approp	oriate College
Graduate College Approval:	Graduate College Signature	Here		
The signature of the Graduate College indicates that the credit by examination request has been approved as listed above.				