

Office of the University Registrar 25 University Avenue, West Chester, PA 19383 Ph: 610-436-3541 Fx: 610-436-2370 www.wcupa.edu/registrar WCU ID#

Required

CREDIT BY EXAMINATION

<u>Instructions</u>: Please refer to the Undergraduate Catalog for policy regarding Credit by Exam. Complete all information and obtain the needed approvals. Once approvals are granted, you will need to pay for the Credit by Exam at the Office of the Bursar. The fee is equivalent to the cost of a CLEP exam. This form will not be processed until payment has been made and the Bursar's Office stamps below. Return completed form, with payment receipt, to the Registrar's Office for processing **before the end of the Drop/Add period**.

erm: LI Fall	□ Winter	_ 🗆 Spring	□ Summer(Year &	
(Year)	(Year)	(Year)	(Year &	Session)
tudent Name:		Major:		
tudent's signature/Da	ate (required):			
To be completed by fa	culty member/dep	artment chair:		
Subject area:Ca	atalog number:	Section:		
Course Title:		Credits/	Units:	
The departmen	nt offering the course	must create the cours	e and section as Credit-By-E	'xam.
Evaluation Procedures	S:			
Instructor's Signatur	'e:	Date	2:	
		ADMINISTERED UNT LY AUTHORIZED CO	IL FACULTY MEMBER	
APPROVED Departm	ent Chairperson: _			
			Date	
APPROVED Dean of (College:			
	-			
		[Date	
	Office of the Bursar:	Authori	Date zation Office of the Registrar:	
F	Office of the Bursar:	Office Use Only		