

Course / External Exam Substitution Petition

Before completing this form, the STUDENT must consider and understand the following:

- A course substitution is for a major course ONLY—no General Education (GE) courses or graduation requirements will be considered.
- Substitutions in the major for the Associate Degree for Transfer (AD-T) should be **consistent with the Transfer Model Curriculum** (TMC). Refer to www.c-id.net for information about the TMC. If the substituted course was taken at a California community college and www.c-id.net for information about the TMC. If the substituted course was taken at a California community college and www.c-id.net to required **C-ID Descriptor**, then **this form is not needed**. Simply provide this information to the Admissions Evaluator.
- Only coursework completed at a regionally accredited institution, with a grade of "C" or better, will be considered (C- is not acceptable).
- Unofficial transcripts or external exam scores are acceptable for <u>initial review ONLY</u>, **official transcripts** and/or external exam scores must be submitted to the Admissions & Records Department (A&R) to be awarded the degree / certificate.
 - We highly recommend that you contact the institution where the course was completed to request a Course Syllabus or Course Outline of Record (if applicable).

FOR STUDENT TO COMPLETE (For Course Substitution for a Major Requirement)	
Student Name:	EVC Student ID#:
Phone #: Email	
Requesting Substitution for a Major Requirement for program	: A.A. A.S. ADT Certificate
Name of Certificate / Major Program:	Catalog Year:
EVC Required Major Course (ex: BIOL 004A or ENGL 001A):	Semester Units:
Other College / Institution Course (ex: BIO 100 or ENG 100):	Semester Units:
	Sem./Year:
Name of College / University Where Course Was Taken:	
(for External Exam (Advanced Placement) Substitution for a Major Requirement)	
EXTERNAL EXAM Substitution:	Exam score: Month / Year:
Semester units allowed by EVC: (usually 3.0)	
 If a unit deficiency results, this will be met with the following cou 	urse: Where taken:
Student Signature:	Date:
••••••	
FOR ACADEMIC DEPARTMENT / DIVISION TO COMPLETE ONLY	
Have you checked the following resources?	☐ TES ☐ TMC (ADTs only)
Approved Denied	
If denied, reason for denial:	
Faculty Printed Name:	Faculty Signature:
FOR ADMISSIONS & RECORDS TO COMPLETE ONLY	
Evaluator Printed Name:	Evaluator Signature:
Date received & Scanned into Database:	_

Revised: 3/15/24