

Department of Mathematical Sciences

Credit by Examination Form

** This form must accompany the "Credit by Exam Form" obtained from the Registrar **

Student Information

Name: _____ Date: _____
Student ID: _____ Major: _____
Phone: _____ Email: _____

Certification (check all that apply)

- I am an admitted UNLV student
 I have less than 30 hours in 'credit by exam'
 I have NOT taken this course previously at UNLV and failed
 I will NOT be using this course as a prerequisite for another math course. If so, what course: _____
 I have NOT previously taken credit by exam for this class. If so, provide date of exam: _____
 I have NOT received credit for a class more advanced than the one requested. If so, please explain/justify an exemption: _____

Course Requested

- | | | |
|-----------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> MATH 120 | <input type="checkbox"/> MATH 124 | <input type="checkbox"/> MATH 126 |
| <input type="checkbox"/> MATH 127 | <input type="checkbox"/> MATH 128 | <input type="checkbox"/> MATH 132 |
| <input type="checkbox"/> MATH 181 | <input type="checkbox"/> MATH 182 | |

Objectives and Background

List objectives of chosen course:

List background/evidence of covering objectives (attach transcripts and/or documentation):

Acknowledgement

Student Signature

Date

** For Department Use Only **

Student is is not eligible for credit by exam. Instructor on record: _____

Undergraduate Coordinator Signature

Date