

**EMBRY-RIDDLE AERONAUTICAL UNIVERSITY - PRESCOTT
APPLICATION FOR COURSE EQUIVALENCY EXAM**

The COURSE EQUIVALENCY EXAMINATION program allows students to verify course knowledge received through non-traditional educational endeavors, independent study and reading. This completed application form must be delivered to the appropriate Department Chair a minimum of three (3) weeks prior to the announced examination date.

I, _____ ID# _____ do hereby request permission to take the

COURSE EQUIVALENCY EXAMINATION in:

Course number _____ Course Title _____ Credit Hours _____

Student Signature _____ Date _____

Department Chair Signature _____ Date _____

.....
CERTIFICATION BY RECORDS OFFICE

The above named student is not currently enrolled in, has not received credit for or failed the course, and has not previously applied to take the COURSE EQUIVALENCY EXAMINATION for the above-mentioned course. Student is not within his/her last 30 credit hours. This certification expires at the end of the current semester (term).

_____, 20____, _____
Semester/term Signature/date

.....
CERTIFICATION BY UNIVERSITY BURSAR THAT FEE HAS BEEN PAID

Fee for the COURSE EQUIVALENCY EXAMINATION IS \$500.00

Received by/date

Cashier's Date Stamp

.....
CERTIFICATION TO RECORDS OFFICE

This is to certify that the above named student took the COURSE EQUIVALENCY EXAMINATION as identified above on _____ and has () PASSED or () FAILED the examination.

Signature of Instructor grading the examination/date