Office of the Registrar

Competency Exam Form

(All fields outlined in red are REQUIRED. An answer must be provided in order to save form)

Name:		PWID #		
		Phone #		
1. The que 2. The and 3. The thai 4. The exa 5. The exa 6. The	estion. If so, the student will complete student will discuss the competence of from the department chair offering a student will take the form to the St toffice on the form. The student will take the form, with payamination. The department chair, or designee, will am on the Competency Exam Form.	e academic department chair to the the Competency Exam Form. It is a second the course. It is a second to the academic advantation and administer the examination and	Please note: determine if an exam is available for the course in isor and secure approval on the form from their advisor ssociated fees (\$100/per credit), with payment noted by epartment housing the course to schedule the d indicate whether the student has successfully passed the Office of the Registrar for posting to the student's	
I petitio	on for credit by competency e	examination for:		
CRN:	Subject:	Course Number:	Section:	
Course T	Fitle:		Credit Hours:	
	in the course previously? Yes ly petitioned this course? Yes	No If yes, when?		
Student Signature			Date	
Advisor Signature			Date	
Department Chair Signature			Date	
Pass				
Fail	Instructor/Exam Administr	rator Signature	Date	
Payment	:			
	Student Accounts Signature		Date	

- Student to complete application and submit to Advisor for approval. **Digital signatures are preferred.**
- Advisor to digitally sign form and forward to Department Chair for approval
- Department Chair to sign in approval and Secretary/designee to email signed form to Registrar@pennwest.edu
- Please follow naming convention: TERM_PWID_COURSE_CHALLENGE
 - o Example: 202330_P11100023_COURSE_CHALLENGE