



PROFICIENCY EXAMINATION AUTHORIZATION

Student Name _____ ID No. _____

Box No. _____ Faculty Advisor _____

<u>Course No.</u>	<u>Course Title</u>	<u>Credits</u>	<u>Semester</u>
_____	_____	_____	_____

Please follow the steps in the order presented below:

1. Request for exam approved by Instructor.

Instructor Signature

Date

2. Request approved by Division Chair.

Division/Program Chair Signature

Date

3. Pay the test fee.

Payment of \$_____ received.

SFS Office Representative Signature

Date

4. Complete exam.

Instructor Signature

Date

_____ (Minimum grade of C- required to pass)
Grade

5. Instructor returns completed form to Records Office.
(Attach copy of test)

Date Received

Date Grade Posted

Distribution: Instructor Advisor Student Business Office Academic Affairs