

Saddleback College Prerequisite Evaluation Form

Semester: Fall ___ Spring ___ Summer ___

STUDENT: Please fill out boxes A, B, & C completely and attach any supporting documents and/or course descriptions.

Academic Year 20 ___

A. Name _____ Social Security # _____ Student ID # _____
Last First MI

Other names on Transcripts _____ Date of Birth _____ - _____ - _____ Daytime Phone # _____
Last First

B. Dear Student:

Web 10/03

- * Given the large amount of equivalency petitions, please allow a minimum of **5 working days** for this petition to be processed.
- * It is the responsibility of the student to provide **proof of course completion** (transcripts with passing grades) and supporting documentation for out of state universities (course descriptions) or this petition will be denied (contact Matriculation Office for more information [949-582-4970]).
- * It is the responsibility of the student to check back, **in person**, with the appropriate department to find out if the petition has been approved or denied.

(NO PERSONAL INFORMATION CAN BE RELEASED OVER THE PHONE)

I believe that the prerequisite has been met by taking courses at a college or university other than Saddleback. A high school Math appeal request is a different alternative evaluation form. I have read all statements. I have submitted proof to support this petition as follows (you must mark **ONE** of the three choices):

- Official transcripts in a sealed envelope attached. (unsealed transcripts are considered unofficial)
- Official transcripts were sent to Admissions and Records on... Month _____ Year _____ (date received by A/R)
- Unofficial transcripts, report cards, or AP scores. Matriculation placements scores from another California community college are attached and must have raw scores and placements, as well as the school name.

Transcripts that are official will be sent to the Admissions and Records Office. Unofficial transcripts will be used for this form only and will not be kept on file. Transcripts submitted to the college, will NOT be returned to the student.

Student Signature _____ Today's Date _____

C. What course do you want to take at Saddleback?	At what School/University was the prerequisite taken?	What was the prerequisite course name and number ?	When was this course taken (Semester/Year)?

(Office Use Only)

Evaluator's Decision	Reason	Date
<input type="checkbox"/> Approved <input type="checkbox"/> Denied		
<input type="checkbox"/> Approved <input type="checkbox"/> Denied		
<input type="checkbox"/> Approved <input type="checkbox"/> Denied		

The Matriculation Office clears any courses involving an English or Math prerequisite, only. Please contact the division office responsible for the academic area for any other prerequisites.

(Office Use Only)

Evaluated By : _____ Date _____

Transcript Search: Date _____

- 1 - No Trans on File
- 2 - Substandard Grade
- 3 - Prereq Course Not Equivalent
- 4 - Other (explain in notes)

Entered By : _____ Date _____

Notes: _____

Placement _____