

OFFICE OF REGISTRATION & RECORDS

College Drive • P.O. Box 2001 Toms River, NJ 08754-2001 PHONE 732-255-0304 TTY & VOICE RELAY 711

APPLICATION FOR CREDIT BY EXAMINATION

Students who wish to receive credit for learning accomplished through non-accredited institutions and/or work experience may apply for credit by examination. Applicants must be enrolled in the college and be degree-seeking. Applicants must not have already received the maximum allowable transfer credits toward a degree. Note that not all courses will be approved for credit by examination, and not all students will qualify to take the exam. Using pre-established criteria, the Dean will discuss with the student their candidacy to take a particular examination. The exam fee is based on the number of credits the course is worth. A successful credit by examination will appear on the student's record with a grade of *P (passed).

INSTRUCTIONS: The student must fill out the first portion of this application. They will be contacted for further information as the application is being reviewed.

■ TO BE COMPLETED BY APPLICA	NT			
Name	Student ID or SSN			
Street Address	City		State	Zip
Preferred Phone	Email		Major	
Examination requested for	Course Number		Course Title	Credits
Signature of Applicant				
■ TO BE COMPLETED BY OFFICE	FOR OFFICE			
Student is matriculated in the academ	ic program of			
Number of transfer credits on record is				
Signature of Registration and Records Professiona				
■ TO BE COMPLETED BY ACADE	MIC SCHOOL DEAN FOR COUR	SE LISTED ABO	VE	
Applicant is \square qualified to take the ex	am, to be administered by			
Applicant is \square not qualified to take th		Name of Ins	structor to Administer Exam	
Signature of School Dean				
■ TO BE COMPLETED BY THE CA	SHIERS OFFICE		Examination Fee Recei	ived by Cashiers Office:
■ TO BE COMPLETED BY INSTRUCTOR ADMINISTERING EXAMINATION*		ATION*	Signature of Cashier	
Applicant ☐ PASSED the exam.	Applicant ☐ DID NOT PASS t		Oignature	or oddinor
Applicant L. PASSED the exam.	Applicant LI DID NOT PASS t	ie exam.		
Signature of Instructor Administering Exam				
*Note to Instructor: Send this form and	the exam to the Office of the Vice Pres	ident of Academic	Affairs.	
■ TO BE COMPLETED BY VICE PR	ESIDENT OF ACADEMIC AFFA	RS		
☐ Credit approved with grade of "Pas	s".	o NOT enter on red	cord.	
Signature of Vice President of Academic Affairs _				
COMPLETED FORM WILL BE RET	AINED BY REGISTRATION AND	RECORDS		
☐ Credit and grade of pass is recorded	d on permanent record, per approval a	bove. \square Not a	approved, no credit give	n.
Signature of Registrar				