

# CHALLENGE/WAIVER RESULTS

## Instructions to instructor:

This form is to be completed *by the instructor* of the challenged/waived class. The instructor must sign the form in order for the student to receive credit or have the requirement waived.



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STUDENT'S NAME: \_\_\_\_\_ ID #: \_\_\_\_\_

This student (choose one):

Passed a waiver examination

Earned challenge credit by examination

Student received a grade on the challenge exam of \_\_\_\_\_ for \_\_\_\_\_ hours of credit

Did not pass the waiver/challenge exam

COURSE CODE: \_\_\_\_\_

COURSE TITLE: \_\_\_\_\_

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**Instructor's Name**

**Instructor's Signature**

**Date**