

# UNION COLLEGE

## APPLICATION FOR CHALLENGE CREDIT

Student Name \_\_\_\_\_ ID \_\_\_\_\_ Term \_\_\_\_\_

Course No \_\_\_\_\_ Title \_\_\_\_\_ Credit Hours \_\_\_\_\_

Instructor \_\_\_\_\_ Date \_\_\_\_\_

Department Chair \_\_\_\_\_ Date \_\_\_\_\_

1. Once the Instructor and Department Chair have signed this form, take it to the Business Office to pay the fee.
2. After paying, take this form, with receipt attached, to the Vice President of Academic Affairs for approval.

Business Office \_\_\_\_\_ Date \_\_\_\_\_

Vice President for Academic Affairs \_\_\_\_\_ Date \_\_\_\_\_

**Submit completed form to the Office of the Registrar.**