Credit by examination provides students the opportunity to receive credit in courses by demonstrating that they have acquired sufficient knowledge of a subject without formal enrollment in a course or study in the classroom. This opportunity is offered only to students enrolled full- or part-time at the WVU Morgantown campus. The initiation of a credit-by-examination request does not entitle a student to special in-class instruction or tutoring by an instructor.

**Application for Credit by Examination**

Name: ___________________________  Student ID: ___________________________
Major: ___________________________  Expected Date of Graduation: ____________

**Course Name and Number (one course per form):**

| Examination Date: |  |
| Examination Time: |  |
| Place of Examination: |  |
| Name of Exam Proctor: |  |

Please answer the following questions:

1. □ YES  □ NO  Have you attempted this course by examination previously? (If “YES”, you are not eligible to take the examination)

2. □ YES  □ NO  Have you completed a graded attempt of this course with a grade (A, B, C, D, F or I)? (If “YES”, you are not eligible to take the examination)

3. □ YES  □ NO  Have you withdrawn from this course within the last two academic terms (fall, spring, or summer)? (If “YES”, you are not eligible to take the examination)

The NON-REFUNDABLE FEE of $50.00 is to be billed to your student account. You must pay the fee before you take the exam.

I HAVE READ AND UNDERSTOOD THE POLICIES AND PROCEDURES ON CREDIT BY EXAMINATION AND VERIFY THAT THE INFORMATION STATED ABOVE IS ACCURATE.

Student’s Signature ___________________________  Date: ____________

**Endorsement of Department (Approval for exam date, time, location, and course):**

Instructor Signature ___________________________  Date: ____________

Proctor Signature* ___________________________  Date: ____________ (if different from instructor)

Dept Chairperson’s Signature ___________________________  Date: ____________

Once the above information has been completed the form must be submitted to Staler Student Services in 340 Mineral Resources Building for review at least one week prior to the requested exam date.

Form will be submitted to the instructors on the exam date so the result can be recorded below.

Instructor, please check the result, sign, and resubmit back to Student Services for processing:

☐ The above student HAS SATISFACTORILY PASSED an examination in the course named.

☐ The above student HAS NOT PASSED.

Instructors’ Signature ___________________________  Date: ____________