



**UNITED TRIBES
TECHNICAL COLLEGE**

REGISTRAR'S OFFICE

3315 University Drive
Bismarck, North Dakota 58504
Phone: 701.221.1850
Fax: 701.530.0636 | registrar@uttc.edu

Petition for Credit by Examination

STUDENT INFORMATION

Student ID			Name			
Email				Phone		
Address			City		State	Zip
<input type="checkbox"/> Campus Based <input type="checkbox"/> Online		Student's Program of Study (Major):				

COURSE INFORMATION

Course #		Course Title			Credits	
<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer		Academic Year		Instructor		

Method of Preparation; explain:

I certify that I am the above named person and the information I have provided is accurate.

Student Signature			Date	
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A "wet" or ink signature is required; an electronic signature will not be accepted because it cannot be authenticated by the college.

APPROVALS	Instructor	The examination will be a <input type="checkbox"/> Regular Final OR <input type="checkbox"/> Special Examination		Exam Date		
		Signature			Date	
	Department Chair (for course)	Signature			Date	
	Dean of Instruction OR CTE Director	<input type="checkbox"/> Credit will not duplicate work already recorded on student record. <input type="checkbox"/> Student is in good standing and registered for the current term.		Signature	Date	

Grade Report

Exam Grade		Instructor Signature		Date	
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Return to UTTC Registrar's Office

FOR OFFICE USE ONLY

Fee (\$10) paid _____ Date _____

Date final grade posted _____ By _____