



PREREQUISITE/CO-REQUISITE CHALLENGE FORM

A student without transcripts of other proof of having met the prerequisite course(s) required for entry into a particular course must go through the Prerequisite Challenge Process:

- 1. Complete the Prerequisite/Co-requisite Challenge Form. Forms are available in the following locations:

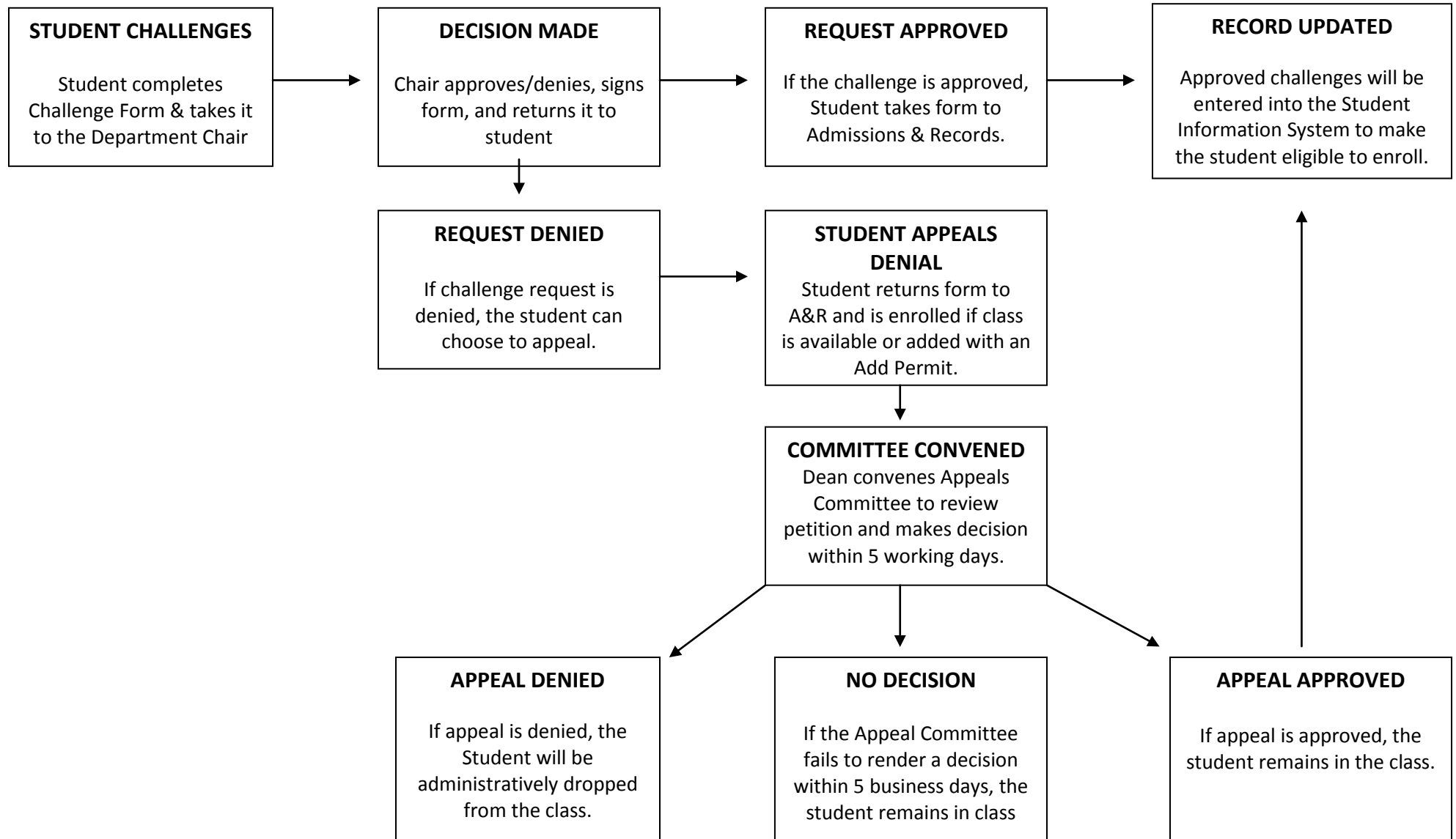
Table with 2 columns: Office, Location. Rows include A&R - Records Counter, Academic Affairs, Counseling Department, EOPS, and SSD (formerly DSPS).

- 2. Take the completed form to the chair of the department through which the course is being offered.
3. The chair will approve or deny the challenge, providing written reasons in the space provided on the Prerequisite/Co-requisite Challenge Form, sign and date his/her response, and return the form to the student.
4. All Challenge Forms must be processed by A&R no later than the Last Day to Add Classes.
5. If the challenge is denied and the student wishes to appeal the chair's decision, the student should:
a. bring the form, signed and dated by the Chair, as well as the student, to Admissions & Records.
b. Academic Affairs will call a meeting of the Prerequisite/Co-requisite Appeals Committee.
c. the committee will decide on the appeal within five-working days from the date the appeal is filed.
d. if the Appeals Committee fails to render its decision within 5 days, the student will be allowed to remain in the class.

## PREREQUISITE/CO-REQUISITE CHALLENGING PROCEDURES

### **Important Notice:**

Students with transcripts from schools outside the Los Angeles Community College District or other proof do not need to use this challenge procedure; take transcript to Admissions & Records.





Los Angeles Valley College

5800 Fulton Avenue  
Valley Glen, California 91401-4096

Semester of Enrollment

<input type="checkbox"/> Fall	<input type="checkbox"/> Winter
<input type="checkbox"/> Spring	<input type="checkbox"/> Summer
Year _____	

**PREREQUISITE/CO-REQUISITE CHALLENGE FORM**

Last Name

First Name

8 8

Student Identification Number

Social Security Number or alternate Student ID Number

Street Address

Date of Birth

City

State

Zip Code

Telephone Number

Desired Course	Prerequisite/Co-requisite

Check the reason for the challenge and attach documentation:

**The student is responsible for providing evidence to support any of the following challenges to pre or co-requisites. To warrant consideration, evidence should be clear and reliable. Challenges must be turned into Admissions and Records no later than one the Last Day to Add Classes.**

- The prerequisite/co-requisite is not necessary to succeed in the course for which it is required.
- The prerequisite/co-requisite is not reasonably available.
- The student has the documented knowledge or ability to succeed without meeting the prerequisite/co-requisite.
- The student believes it to be unfound that he/she might cause a health or safety hazard.

Comments:

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Student's Signature

Today's Date

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Student's Information**

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

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**CHAIR'S RESPONSE**

Your request has been  
**Comments**

Approved  Denied

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Department Chair or Designee's Signature

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Date

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**STUDENT'S APPEAL**

I wish to appeal the decision of the Department Chair

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Date

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**APPEALS COMMITTEE'S RESPONSE**

Your request has been  
Comments:

Approved  Denied

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Appeals Committee Chair's Signature

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Date

**FOR OFFICE USE ONLY**

Section # \_\_\_\_\_

Semester \_\_\_\_\_

Fall  Winter  
 Spring  Summer  
Year \_\_\_\_\_

Instructors Name \_\_\_\_\_  
Challenge Procedure + Form 8-23-2017

