Requisite Challenge Form

Instructions:

1. Student submits signed challenge form to Department Chair/Instructor two weeks prior to the start of instruction.
2. Department Chair/Instructor reviews the challenge form and supporting evidence.
3. Department Chair/Instructor signs and submits Summary of Action to Division Dean within 5 working days.
4. Division Dean signs and reviews the challenge form, and provides written notification to the student of action taken.
5. Division Dean submits the challenge form to Admissions & Records for processing.

Student ID: ___________________________ Semester: ___________________________ Date: ___________________________

Name: __________________________________________

Address: __________________________________________

Phone: ___________________________ City, State, Zip ___________________________

Which course would you like to enroll in? ___________________________ What is the pre/co-requisite course? ___________________________

Please select a rationale below for challenging the course requisite. **Student documentation is required.**

☐ The requisite has not been made available and is causing undue delay in attaining the goal of the student’s educational plan. The student has not been able to take the course, which is part of the student’s educational goals or plans, because the requisite course has not been available or accessible to the student.

☐ The requisite is not valid because it is not necessary for success in the course for which it is required. The student can provide documentation that the requisite course is not necessary in order for him/her to succeed in the requested course.

☐ The prerequisite is unlawfully discriminatory or applied in an unlawfully discriminatory manner. The student can demonstrate there is a policy or practice in place that prohibits the student’s access to the requisite course.

☐ I have the knowledge or ability to succeed in the course without the required requisite. The student will provide documentation that he/she can succeed in the course without the requisite.

I acknowledge Santiago Canyon College determined that the course requisite is required for success in the course. If the requisite is waived, I am taking personal responsibility for succeeding in the course without the required requisite.

Student Signature ___________________________________________ Date ___________________________

Summary of Action Taken: ___________________________________________

Instructor ___________________________________________ Date ___________ □ Approved □ Denied

Signature

Department Chair ___________________________________________ Date ___________ □ Approved □ Denied

Signature

Division Dean ___________________________________________ Date ___________ □ Approved □ Denied

Signature

Admissions & Records ___________________________________________ Date: ___________________________

Signature