LONG BEACH CITY COLLEGE
ADMISSIONS AND RECORDS

Challenge Form- Prerequisite

Name: _____ _____ _____
First Name Last Name MI

Student ID #: _____ Phone Number: _____ Email Address: _____

Prerequisite/Co-requisite Challenge

Course I wish to enter _____

Prerequisite/Co-requisite requirement I wish to challenge _____

A prerequisite/co-requisite challenge requires written documentation about the background or abilities which adequately prepare a student for the course. Reasons for seeking a Prerequisite/co-requisite Challenge Form may include one or more of the following.

Check the box which applies to you:

☐The prerequisite/co-requisite has not been established in accordance with the District's establishing prerequisites.(Student documentation required)

☐The prerequisite/co-requisite is not valid because it violates Title 5 regulations. (Student documentation required)

☐The prerequisite/co-requisite is discriminatory or applied in a discriminatory manner. (Student documentation required)

☐The prerequisite/co-requisite states that I don't qualify to take the course. Based on my knowledge or ability to succeed in the course, I challenge this statement. (Student documentation required)

☐The prerequisite/co-requisite is not reasonably available.

☐The prerequisite/co-requisite, which states I might cause or experience a health or safety hazard is unfounded. (Student documentation required)

It is the responsibility of the student to provide compelling evidence to support the challenge. Please explain your request in detail and attach this information to this form. I understand that I must take the petition and other forms (e.g. transcript, catalog description, course outline, and/or syllabus) directly to the Department Head or Division Office who will arrange for an instructor to evaluate the documentation. I understand I am responsible for providing the academic department with all the supporting information required for a course evaluation.

I acknowledge that I have read and understood the above written statements.

Student Signature: _____

_____ _____
Department Head/ Design Date

Print Name Department Head/ Designee