

REQUEST FOR CHALLENGE EXAM

TO: Division of: Applied Science & Technology (Circle one of the above)		Business & H	ospitality 1	Liberal Arts	
Student Name:					
Surname	Maiden (if applica	able)	First Name	Middle Initial	
Student ID#:		Date of Birth	D / M /	Y	
Contact Numbers: (H)	(C)		_ (W)		
Division:	Progr	amme:			
In accordance with the College Callisted above to: receive cred receive cred In regards to writing a challenge ex (1) The challenge exam a fee (2) A course may be challenge (3) I cannot challenge a cour (4) A maximum of 15 credits (5) A grade of at least C must academic record; the not (6) I must return this form so Challenge Exam deadling	it	satisfy a pre-requent the following at the Business ady have a grad challenge. rn credit, but not tered and the G	uisite Office. e at Bermuda Co o grade will be ro PA is not affecte	ollege. ecorded in the	
Student Signature:		Date: _	D / M /	Y	
ADMINISTRATIVE USE ONLY:		Date:	D / M /	Y	
Response: Credit Received		☐ (Cre	dit Denied)		
Examination Date:		Time:			
Challenge Examination Grade:					
Signature of Dean:					