NDSU

NORTH DAKOTA STATE UNIVERSITY

Petition for a Course Challenge

Submit form to: Office of Registration & Records, Ceres 110, NDSU Dept. 5210, P.O. Box 6050, Fargo, ND 58108-6050, Fax 701-231-8959
or Bison Connection, 176 Memorial Union, NDSU Dept. 5290, P.O. Box 6050, Fargo, ND 58108-6050, Fax 701-231-8297

Tuition for the course challenge and authorization from the Office of Registration and Records must be provided prior to the challenge

Date _____ Student ID# _____ Program/Major: _____

Name (please print): Last _____ First _____ MI ____

Home / Local Address: Street/P.O. Box _____ Apartment # _____

City _____ State _____ Zip _____

Phone Number: _____ Email: _____

Course to challenge: Subject/Catalog Number _____ Course Title _____ Units (Credits) ____

I feel I should be permitted to challenge this course for the following reasons: (*Be specific -- show previous experience or education you have had you feel qualifies you to challenge a course for credit. Please attach pages as needed)*

Student Signature _____ Date _____

Guidelines for a Course Challenge:

A challenge is only permitted for courses in which you have not received transfer credit or have a previous academic record. Prior registrations are allowable if course was dropped prior to the No Record Drop deadline in a given term. You must be registered at NDSU during the semester in which you wish to challenge a course (See current NDSU Bulletin for complete description.)

1. Student must obtain approval from the instructor, department chair, and advisor. *(see **Part A** below)*
2. Student must pay the course challenge fee at Customer Account Services, Ceres 302. *(Fee is 50% of the regular credit tuition charge.)*
3. Student must present proof of payment and this form to the Office of Registration and Records or Bison Connection.
4. Department must submit a grade change form to the Office of Registration and Records.

Challenges will not be recognized without petition authorization.

For Departmental Use Only

Part A: Petition Approval

Instructor of the Course _____ Date _____

Department Chair/Head or Program Coordinator Offering the Course _____ Date _____

Advisor _____ Date _____

For Registration & Records Use Only

Part B

Currently registered at NDSU? ☐ YES ☐ NO

Currently or previously registered for this course? ☐ YES ☐ NO

Course Challenge: ☐ PASSED ☐ FAILED