NORTHWEST
LOUISIANA TECHNICAL COMMUNITY COLLEGE

Credit by Testing or Examination Form

Last Revision: 7/7/2025
Policy Reference: #1.023 - Credit for Prior Learning

Name: _____ Student ID# _____

Program Major: _____ Campus: _____

I wish to challenge the following course with an assessment given by my instructor:

Course Title/Name _____

Course No. and Prefix _____Credit Hours: _____

Student Signature: _____ Date: _____/_____/_____

Instructor Signature: _____ Date: _____/_____/_____

Course Challenge Administrative Fee (Fee must be paid prior to assessment being given.)

Amount Paid _____ Payment method _____ Cash _____ Check _____ Money Order

Fee Waived _____ Fee Waived Signature _____

Payment received by: _____ Date: _____

Approval of Grade:

Date Exam Taken: _____ Exam Score: _____ Grade: _____

Instructor Signature: _____ Dean/CAO Signature: _____

Processing Authority:

Entered in system by: _____ Date entered: _____

Supporting evidence should be attached to this form.