



CGCC Student ID # Student Name				
Studen	ts Mailing Addı	ress	Phone:	
Degree	/Certificate			
Studen	t Signature		Date	
Please	carefully read	the following instructions:		
1.	All appropriate documentation (i.e. training records, certifications, official test scores) must be attached to this form unless they have already been sent directly CGCC. If sent to us they must be unopened documents. They can be mailed or brought to CGCC, 400 E Scenic Dr, The Dalles OR 97058			
2.	2. The signed and completed form must be submitted to the CGCC Student Services, either in person or by mail to CGCC, 400 E Scenic Dr, The Dalles OR 97058. The form may be emailed to studentservices@cgcc.edu if sent from your CGCC student assigned email for college students or high school email for high school students.			
3.	3. You will be notified via your MyCGCC email regarding the outcome of this request.			
4.	You must hav	e an established CGCC transcript before non-tra	ditional credit is awarded.	
		Subject Area Ex	<u>kams</u>	
☐ Che	ck here to requ	est college credit for Advanced Placement (AP)	scores.	
☐ Che	ck here to requ	est college credit for College Level Examinatio	n Program (CLEP) scores.	
☐ Che	ck here to requ	est college credit for International Baccalaurea	te (IB) scores.	
		Formal Course Work at Non-Ac	credited Institutions	
☐ Che	ck here to requ	est college credit for formal training from non-	accredited institutions.	
Type of	formal training]		
		FOR EVALUATOR US	SE ONLY	
_		CGCC course equivalents to be posted to st	·	
Cours	se Number	Course Title	Credit Hours	
	. 6:	of Approval	Date	