

PREREQUISITE VERIFICATION FORM

Admissions and Records | 5055 Santa Teresa Blvd. | Gilroy, CA 95020

DIRECTIONS: Complete this form and indicate which course(s) you are seeking approval. Incomplete or unsigned forms will be automatically denied. Once this form and all supporting documents are submitted, Gavilan College Evaluator will notify you within **3 business days** via phone regarding approval or denial of the course prerequisite verification.

Registration Term: Fall Spring Summer 20_____

STEP 1: Student Information

Student Name: _____ Student ID #: **G00** _____

Phone #: (_____) _____ - _____ Gavilan College Email: _____@my.gavilan.edu

STEP 2: Documentation

Check the option you are using to verify the prerequisite:

- Coursework taken at another U.S. College/Institution:** Complete Step 3A
ATTACH A TRANSCRIPT SHOWING A GRADE OF "C" OR BETTER AND COURSE DESCRIPTION(S) AT THE TIME YOU TOOK THE COURSE(S).
- AP test score of 3 or higher** (Attach an AP Test Score Report from CollegeBoard): Complete Step 3B
- Assessment/Placement Exam** (Assessment scores only valid for 2 years from date of exam): Complete Step 3B

STEP 3A: COURSEWORK Equivalency Chart

| Course(s) I want to take at Gavilan College | Gavilan College prerequisite | Institution where prerequisite was completed | Course Number & Course Title <i>at previous institution</i> | Grade | OFFICE USE ONLY (Approved/ Denied) and Staff Initials |
|---|------------------------------|--|--|-------|--|
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STEP 3B: ASSESSMENT Equivalency Chart

| Course(s) I want to take at Gavilan College | Gavilan College prerequisite | Institution where assessment was completed | Name of Assessment and Year Completed | Score or Placement | OFFICE USE ONLY (Approved/ Denied) and Staff Initials |
|---|------------------------------|--|---------------------------------------|--------------------|--|
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STEP 4: Submit for Review

Submit completed, signed form with all supporting documents attached to:

Admissions and Records Department (in person)
OR Email: evaluator@gavilan.edu
Phone Number: (408) 848-4723 | **Fax Number:** (408) 848-4801

By completing this form, I acknowledge this is **not** an official evaluation of my external coursework; I understand I will **not** receive course credit. This form is for the purpose of verifying a prerequisite to a class I plan to take at Gavilan College, as identified on this form. I have the course description and believe the course work from the external institution meets the prerequisite criteria.

Student's Signature: _____ Date: _____

FOR OFFICE USE ONLY COUNSELOR/EVALUATOR NAME: _____ INB: Yes No Date: _____