



IN PROGRESS PREREQUISITE VERIFICATION FORM

If you are currently taking a prerequisite course outside of the San José/Evergreen Community College District that is required to enroll in an EVC course, you must complete this form. Please follow steps 1-3, save, and print the form for your appointment with a counselor. Please include proper documentation with college name, enrollment verification, and course description. The counselor will review this form to ensure that the prerequisite course is equivalent to the EVC prerequisite.

Step 1 - STUDENT INFORMATION

EVC Student ID: _____
Student Last Name: _____ First Name: _____ Middle Name: _____
Phone Number: _____ E-mail: _____

Step 2 - EVC COURSE YOU ARE REQUESTING TOTAKE

I wish to enroll in EVC Course (Dept. & Course #): _____ for _____ semester _____ year
Prerequisite Course # _____ @College: _____ = EVC Course # _____
Prerequisite Course # _____ @College: _____ = EVC Course # _____

Step 3 - ATTACH TRANSCRIPT—THAT INCLUDES COURSE WORK IN PROGRESS (and Course Description(s) if needed)

Note to student: If your request is approved, it is your responsibility to submit verification of course completion (**a FINAL grade report, an early FINAL grade on official college/university letterhead, unofficial transcript, or official transcript**) to Admissions by the appropriate deadline listed below. Failure to do so will result in course de-registration.

- Prerequisite course completion deadline to remain in Fall EVC course: August 9
- Prerequisite course completion deadline to remain in Spring EVC course: January 11
- Prerequisite course completion deadline to remain in Summer EVC course: June 7

Student Signature (allow electronic signature): _____ Date: _____
* * * * *

Counselor Verification (the first two items are required; the third may be required; check items completed):

- Correct EVC prerequisite(s) is/are listed
 - Student has provided documentation of registration in prerequisite course(s) outside of SJECCD.
 - Student has provided course description(s) of prerequisite course(s) (if needed).
- * * * * *

- COUNSELOR DENIAL:** Prerequisite course(s) outside of SJECCD is/are NOT accepted as equivalent to the EVC Prerequisite (s) for the requested course.
 Documentation of this denial has been made via SARS Alert.

EVC Counselor's Signature: _____ Date: _____
* * * * *

- COUNSELOR APPROVAL:** Prerequisite course(s) outside of SJECCD is/are accepted as equivalent to the EVC prerequisite(s) for the requested course.
 Tentative NCWS entry has been made to allow student to register in course.
- This form has been completed and emailed to the student with a "blind" copy to the A&R electronic mailbox.

EVC Counselor's Signature: _____ Date: _____