Student ID:		Phone Num	nber:
Last Name:			Middle Initial:
_	Valley College Cours r which you are requesting prerec		
Dept.:	Course #:	Title:	
Example: Dept.: Math	Course #: <u>071</u>	Title:	alculus I With Analytic Geometry
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2. 3. Check appropriate box for the doc	•		oted) showing course and final grade
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Routing: Submit form and all attachments to Special. Admit@evc.edu