A&R Staff Initials / Date:	



## Sacramento City College

ENGCW, ENGWR, ENGED, MATH, STAT, PSYC 330/335 PREREQUISITE EQUIVALENCY FORM

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<u>Instructions</u> This form is used for clearing prerequisites using extern	nal credits. Please complete a separate form for each prerequisite.
Student ID:	Phone: ()
Student Name:	Email:
Semester Year  ☐ Fall ☐ Spring ☐ Summer	
I WANT TO ENROLL IN THE FOLLOWING SCC COURSE	THE SCC PREREQUISITE FOR THIS COURSE IS:
Course Name / Number (STAT 300)	Course Name / Number (MATH 120 or completion of Intermediate Algebra)
**Note: Students who have completed or are currently in progress District will have the ability to enroll in the next level course withou	to complete the prerequisite course within the Los Rios Community College at a petition.
I HAVE COMPLETED AN EQUIVALENT COURSE TO TH	E SCC PREREQUISITE:
College/University	Semester/Year
Course Name	Units Grade "C" or better
PLEASE SELECT ONE	
☐ Official Transcripts on file at the Admissions and R	ecords Office.
☐ Unofficial Transcript attached (I understand that U	Inofficial Transcript will not be retained).
STUDENT SIGNATURE	DATE
OFFICE USE ONLY	
☐ The prerequisite course is on the LRCCD External E	Equivalency List:
$\square$ Official Transcript received by A&R not in OnBase (per	•
☐ Official Transcript verified in OnBase	☐ Milestone Created
☐ Unofficial Transcript received ( <b>Unofficial</b> Transcript w	ill not be retained)   □Transfer Credit Posted
Evaluator Signature Date	
☐ The prerequisite course is NOT on the LRCCD Exte	rnal Equivalency List:
Provide the course description from the college catalog of the pre- Please allow 5 working days for processing	·
Approved	Denied
Faculty Signature Date	Faculty/Dean Signature Date