



**Request for Dual Enrollment Test Score Waiver**

Student Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

High School \_\_\_\_\_

Student high school transcript including student’s cumulative GPA attached \_\_\_\_\_ (Required)

We are requesting this waiver because the student:

- Has not taken the PSAT/SAT/ACT/Accuplacer \_\_\_\_\_  
(or)
- Does not meet the course pre-requisite cut-score \_\_\_\_\_

List students PSAT or SAT scores (highest):

- Evidence-Based Reading & Writing: \_\_\_\_\_
- Math: \_\_\_\_\_

Keeping in mind that SMCC and the high school wish to see the student succeed in this college-level coursework, please state the reason(s) SMCC should consider placing the student in the course: *(Feel free to attach a second sheet as needed)*

---



---



---



---



---

Submitted by: Print name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

I understand that an exception would be made for me to enroll in this course. If I am not successful in the course, the grade will be a permanent SMCC record and I will not be allowed to take additional dual enrollment courses at SMCC.

Student Signature \_\_\_\_\_