Application to Challenge a Graduate Course

Challenge Policy - Courses that are part of a master's or credential program's core courses cannot be challenged by examination. A student may, however, challenge (one time) a prerequisite/foundation course after discussing the reasons for the challenge with the department chair or program director and completing the appropriate challenge form obtained from the Registrar's Office. The student pays $100 per unit before taking the challenge exam. If a student does not pass the challenge with a 3.0 (B) or better, he/she must take the full course at NDNU or elsewhere. Only successful results of challenge exams are recorded on the transcript.

Please Note: A Challenge Examination may be taken only once for any given course. A grade of "B" or better must be achieved to complete a challenge.

Instructions:
1. Obtain signature of Program Director/Advisor.
2. Obtain signature of instructor who will administer the Challenge Examination.
3. Take signed form to Business Office and pay fee of $100.00 per unit.
4. After challenge is completed, instructor administering the challenge records the grade, notifies the student and submits this form to the Registrar.

Prior to Challenge:
Student Name: ____________________________ I.D. #: ____________________________

Instructor Name: ____________________________ Year: __________ Semester: ____________
Course #: __________ Course Title: ____________________________ Units: ____________________________

Student Signature: ____________________________ Date: ____________________________
Advisor Signature: ____________________________ Date: ____________________________
Method of Assessment: ___ Exam: ___ Other: ____________________________
Salaried: ___ Yes ___ No
School of: ____________________________
Chair/Dean Signature: ____________________________ Date: ____________________________
Business Office Signature: ____________________________ Date: ____________________________

After Challenge:
Grade: ___ Instructor Signature: ____________________________ Date: ____________________________
Registrar’s Office Signature: ____________________________ Date: ____________________________