

PETITION FOR EXEMPTION FROM SSSP SERVICES



SAN MATEO COUNTY
COMMUNITY COLLEGE DISTRICT

SMCCCD

Check Appropriate College

Counseling
Cañada College
4200 Farm Hill Boulevard
Redwood City, CA 94061
Phone: (650) 306-3452
Fax: (650) 306-3457

Counseling
College of San Mateo
1700 West Hillsdale Blvd.
San Mateo, CA 94402
Phone: (650) 574-6400
Fax: (650) 574-6164

Counseling
Skyline College
3300 College Drive
San Bruno, CA 94066
Phone: (650) 738-4318
Fax: (650) 738-4260

Student's ID# G: _____

Last Name _____ First Name _____ Middle _____

Mailing Address: _____

Phone Number: _____ Email: _____ Semester/Year _____

I REQUEST AN EXEMPTION FROM THE FOLLOWING STUDENT SUCCESS & SUPPORT PROGRAM COMPONENT(S) FOR THE REASONS INDICATED: Per Title 5 – 55532. Exemptions. (Attach documentation to support your request for exemption to this petition.)

ASSESSMENT

MATH PLACEMENT TEST – ENGLISH PLACEMENT TEST – ESL PLACEMENT TEST

You are exempt from the San Mateo County Community College District Placement Tests in ENGLISH or ESL &/or MATH if

You have taken the placement tests in English or ESL and/or Math at Cañada College, Skyline College, or the College of San Mateo within the last two years and test results are available for review. (Attach a copy of test results)

You can show evidence of completed course work in English and/or Mathematics with a grade of “C” or better at an accredited college or university in the United States. (Attach a copy of official or unofficial transcripts.)

You can show evidence of AP scores of 3, 4, or 5 (College Board Advanced Placement Test) in English and/or Mathematics. (Attach a copy of test scores.)

Other: _____

ORIENTATION

You are exempt from the College Orientation requirement if

You can show evidence of having completed 12 or more college applicable units at another accredited college or university in the United States within the past academic year. (Attach a copy of official or unofficial transcripts.)

Other: _____

COUNSELING

You are exempt from the counseling if

You can show evidence of having completed 12 or more college applicable units at another accredited college or university in the United States within the past academic year and know the specific coursework you must complete to achieve your educational goals. (Attach a copy of official or unofficial transcripts.)

Other: _____

By applying for this exemption I realize that I am accepting full responsibility for my education and that I am declining to participate in services that are designed to enhance my successful achievement of my educational goals. Should I enroll in inappropriate courses or encounter academic difficulties, I will not hold Cañada College responsible.

Student Signature _____ Counselor Signature _____ Date _____

Approved _____ Denied _____ Dean of Counseling _____ Date _____ Processed _____ Date _____