## **CLEP PERMISSION APPLICATION**

Date

- \*Please review CLEP guidelines in the Advanced Placement Opportunities brochure.
- \*No credit by examination of any type may be taken during the last semester immediately preceding graduation
- \*CLEP credit granting score is 50.
- \*For students who want to retake a CLEP exam there is a 6 month waiting period.

			Date://
First Name	Middle Initial	L	ast Name
Birth Date/	AU ID#		
Classification: Freshman□	Sophomore□	Junior□	Senior□
Academic Major: Se	mester and year of a	nticipated grad	luation:
Email		Phone #	
Local Address			
City	State	ZIP Co	de
CLEP Subject Examination:		AU Course #	
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PLEASE OB	TAIN THE FOLLOV	VING SIGNAT	TURES
Department Chair of your program	(Name):		
Chair's Signature:		Date	e:
Department Chair of subject you a	re taking (Name):		
Chair's Signature:		Date	e:

## **CLEP TEST FEES**

Per credit fees will be applied to your AU account once passing scores are obtained

\$80 to CLEP: Pay before test day via My Account at <a href="https://clepportal.collegeboard.org/myaccount">https://clepportal.collegeboard.org/myaccount</a> \$40 to CTC Administration Fee (Pay on test day: Charge to AU account or Cash only)

Test fees are **NOT REFUNDED** once the test has started

The above fees are subject to change