



CREDIT BY INSTITUTIONAL EXAM (CBIE) REQUEST FORM

GUIDELINES

1. Students must be currently enrolled in at least one non-PLA course at Kapi'olani Community College.
2. Faculty member determines if student may take CBIE and faculty participation is entirely voluntary.
3. CBIE may be attempted only once for a given course.
4. Students must pay the appropriate CBIE fee prior to being registered for the course.
5. A grade of CE will be recorded on the student's transcript if the student passes the exam with a C or better, a grade of NCE will be recorded on the student's transcript if the student does not pass the exam with a C or better.

Kapi'olani CC Policy: See current College Catalog at <https://www.kapiolani.hawaii.edu/admissions/course-catalog/> for additional information.

I. STUDENT INFORMATION (to be completed by Student)

UH ID/Username: _____ Student Name: _____
Last First M.I.
 I request permission to obtain credit for (Course Alpha/Number): _____ Semester/Year: _____

I understand the impact earning or not earning credit will have on my academic plan and I understand that credit is not guaranteed. I further understand that this attempt to earn credit via CBIE will be recorded in my academic record and that is my responsibility to ensure that all steps listed below are completed prior to the last day of instruction for the term.

Student's Signature: _____ Date: _____

II. INSTRUCTION AGREEMENT (to be completed by Instructor)

I have discussed the above request with the student and agree to give an examination for the course listed above in Part I. Credit and a CE grade will be awarded for passing the examination with a grade of C or better.

Instructor's Name: _____ Instructor's Signature: _____ Date: _____

III. COURSE CREATION (to be completed by Department)

The following course has been created. **CRN** _____ **Course Alpha** _____ **Course Number:** _____
 Reminder: Tuition & Fee Waiver box must be checked in Banner (SSASECT) AND Department Restriction required if course created before end of late registration period.

Department Signature: _____ Date: _____

IV. REGISTRATION STATUS & RESIDENCY RATE CHECK (to be completed by Admissions & Records)

Student is enrolled in at least one non-PLA course at Kapi'olani Community College. YES NO (Student is no eligible to request CBIE)
 Residency Status (check one): Resident (including Non-Resident Exemptions) Non-Resident Pacific Islander (150% of resident tuition rate)

Admissions & Records Signature: _____ Date: _____

V. CBIE PAYMENT (to be completed by Cashier)

This student has been assessed and has paid the appropriate CBIE fee amount based on student's residency status for the current semester.

Fee Amount: _____ Cashier Signature: _____ Date: _____

VI. CBIE COURSE REGISTRATION (to be completed by Admissions & Records)

Tuition & Fee Waiver box **MUST** be checked (SSASECT) for the course listed in Section III above. If not checked, must be corrected by Dept. before student can be enrolled in the course.

Student has been registered for the course as indicated in Section III above. SFAREGS Done: _____

Admissions & Records Signature: _____ Date: _____