



Placement Waiver

This waiver only applies the following courses:

MATH 1140, 1150, 1380, 1410, 1600, 2000, 2040, 2070, 2080, 2170, 2210
BSAD 2170

| | | | |
|---------------|--|------|--|
| CCC ID Number | | Date | |
| Student Name | | | |

| Term | Alpha | Course Number | Section Number | Course Title |
|------|-------|---------------|----------------|--------------|
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Central Community College promotes the success of all students.

By signing this form, I acknowledge:

I understand I am registering for a course above the recommended course placement.

I understand it is in my best interest to reach out to my instructor and utilize tutoring/academic success centers if I start to struggle with concepts in the course.

| | |
|-------------------|--|
| Student Signature | |
|-------------------|--|

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|---|--|
| Parent/Guardian Signature (if Early College) | |
|---|--|

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|---|--|
| CCC employee who reviewed placement waiver with student | |
|---|--|

Notes: 5HFRPPHQGHG VFRUHV IRU PDWK SODFHPHQW

&RXUVH \$&7 6FRUHPDWKHPDWLFV 0\$3 6FRUH
,QWHUPHGLDWH \$OJHEUD 0\$7+
&ROOHJH \$OJHEUD 0\$7+
3UH &DOF 0\$7+
\$SSOLHG 6WDWLVLVLFV 0\$7+
%XVLQHVV 6WDWLVLVLFV %6\$'
\$SSOLHG &DOFXOXV 0\$7+
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