

Illinois Eastern Community Colleges
Proficiency Application

Proficiency credit requires a one-time \$70 fee. The fee must be paid prior to taking the proficiency exam and is nonrefundable.

To be completed by the student

Student Name (please print) _____
Student ID

Address (Street or PO Box, City, State, ZIP)

Phone Number (XXX) XXX-XXXX _____
Email Address

IECC Course Number (e.g. SPN 1111) **Credit Hours** **IECC Course Name (e.g. Elementary Spanish I)**

Proficiency examinations may not be taken for courses in which a student has previously enrolled for credit, audit, or pass/fail. A student may take a particular proficiency examination only once.

I have read and understand the conditions for proficiency examinations as indicated in the latest catalog, or its addendum. **If approved, the student has 30 days from the date of payment** to complete the proficiency exam, or forfeit the exam fee.

Student Signature _____
Date

To be completed by Instructor, Advisor and Dean of Instruction

The student listed above has permission to apply for a proficiency examination for the course indicated.

Instructor's Signature (for approval to attempt proficiency) _____
Date

Advisor's Signature for (for approval to attempt proficiency) _____
Date

Dean of Instruction's Signature (for approval to attempt proficiency) _____
Date

Fee Received By

Fee Received By _____
Date

(Upon payment, the Instructor will arrange a date and time for the proficiency exam)

To be completed by the Office of the Dean of Instruction

Assigned Grade **Instructor Test Administrator's Signature** _____
Date

Dean of Instruction's Signature _____
Date

Grade Recorded in Banner and Imaged By: _____

Date