

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	

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	
Parent/Guardian	
Signature	
(if Early College)	
CCC employee who	
reviewed placement wa	iver
with student	

Notes: 5HFRPPHQGHG VFRUHV IRU PDWK SODFHPHQW

<u>& R X U V H</u>	\$&7 6FRUOHPDWKHPDWLFV 0\$3 6FF	RUH
,QWHUPHGLDWH \$OJHEL	JD 0\$7+	
&ROOHJH \$OJHEUD 0\$7	+	
3UH &DOF 0\$7+		
\$SSOLHG 6WDWLVWLFV	0 \$ 7 +	
%XVLQHVV 6WDWLVWLF	V %6\$'	
\$SSOLHG &DOFXOXV 0\$	57+	
\$QDO\WLF *HRPHWU\ 8	RDOF 0\$7+	