

COURSE PREREQUISITE EQUIVALENCY FORM

P R E R E Q U I S I T E P O L I C Y

All courses with prerequisites and co-requisites are subject to computerized checking. WebSMART searches the San Mateo County Community College District student database for ONE of the following attributes:

1. **Placement test results** completed within the SMCCCD that meet prerequisite skill level requirements. Math placement test results must be from tests completed within the last 2 years.
2. **Successful completion of the prerequisite course within the San Mateo County Community College District.**
3. **Current enrollment in the prerequisite course within the San Mateo County Community College District.**

If none of these attributes is found, registration is blocked and you receive a "Prerequisite Error" message on WebSMART.

D I R E C T I O N S

Complete this Course Prerequisite Equivalency Form if you think you have completed an equivalent prerequisite course outside of the San Mateo County Community College District.

- Complete a petition for **EACH** course for which you seek equivalency.
- Attach a copy of your transcript (it may be unofficial but must include your name, college/university's name, course units and grades).
- Attach a catalog course description of the course you are using as the equivalent.
- Submit the information no later than the Friday prior to the last date to add semester length classes.

Submit your **COMPLETED** form with **ALL** required documentation in any of the following ways:

IN-PERSON: CSM Assessment Center, College College Building 10, Room 370
MAIL: 1700 West Hillsdale Blvd., San Mateo, CA 94402
EMAIL: csmprereq@smccd.edu
FAX: (650) 574-6587

Results of your request will be emailed to your MY.SMCCD email. Incomplete forms will be denied.

Name: _____ CSM G#: _____
Last name First name

SMCCD Email: _____@my.smccd.edu Telephone: (_____) _____

I want to enroll in this course: _____
List CSM course name and number (example: Statistics MATH 200)

The prerequisite(s) for this course is: _____
List CSM course prerequisite name and number (example: Intermediate Algebra MATH 120)

I have successfully completed the course listed below and believe it equivalent to the prerequisite course.

Course name and number	Completed at what college/university	Course units and grade
_____	_____	_____
_____	_____	_____

Questions? Visit www.collegeofsanmateo.edu/prerequisites or call 650-574-6187.

Results of your request will be emailed to your MY.SMCCD email. DATE: _____

Office use only:

____ Approved. You are approved to enroll in the course you requested.

____ Denied. You have not met the prerequisite to enroll in _____

Comments: _____

Staff or Faculty review completed by: _____ Date: _____