

Enrollment Services University Registrar

EM Credit Request Form

Student Informatio	n:	·			
Name					
Last Name First Name				<u> </u>	M.I.
Enrollment Inform	ation:				
OSU ID Number	OSU Campus	Academic Program (Ex UASC)	Term for Posti	ng (Ex11	48)
3335-8-21. This form mu		d for "EM" Credit on the basis of an examination ting Center, University Registrar, for processing			
	, p.0000 0 11 101 0000		Score	PASS	FAIL
Hours Cours	e Title (Ex History 1151)	Test Date		Earned	Denied
Hours Cours	e Title (Ex History 1151)	Test Date		Earned	Denied
Hours Cours	e Title (Ex History 1151)	Test Date		Earned	Denied
	, , ,				
Hours Cours	e Title (Ex History 1151)	Test Date		Earned	Denied
Hours Cours	e Title (Ex History 1151)	Test Date		Earned	Denied
Requestor Informa					
Approval by Departme	ent Contact				
Print Name		Phone or Email			
FOLLOWING SECTION	ON TO BE COMPLETED	O <mark>ONLY</mark> IF EXAM WAS GIVEN BY DEPA	RTMENT		
Instructor Administer	ing Exam				
Print Name		Signature			
Approval by Departme	ent Chair (Credit Departn	nent)			
Print Name		Signature			
Approval by College S	Secretary (Student's Coll	ege)			
Drive Nove					
Print Name		Signature			

Updated June 4, 2018

Testing Center, 585 Student Academic Services Building, 281 West Lane Avenue, Columbus, OH 43210-1132 testing.osu.edu | Email: esue-testing@osu.edu | Phone: 614-292-2241