



2277 Napa-Vallejo Highway, Napa, Ca. 94558 707.256.7200 ◆ fax 707.256-7219

Petition for High School to College Credit

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			NVC Student ID#		
				(7 digit number assigned	d by the college for identification)
Student Name: _	First	MI	Last		
Mailing Address:					
	City		State	Zip	
Email		Pho	one		
of 2015 will require	uest classes to be char e payment in advance. pplicable) and return th	. Please ask for a co	opy of your unofficial to	ranscript, present th	nis to the cashier's
Number of semesters	s that you are requestir	ng High School unit	s to be changed to Co	ollege Credit:	
Number of units requ	uested to be changed:				
	in each semester/s y				
Course	Semester/Session	Course	Semester/Session	Course	Semester/Session
Ex. Math 90	Spring 2010				
	+				1
		1	<u>l</u> .	<u> </u>	
Student S	ignature			Date:	
	_				
Note:	: Submit this form to		Records Office. <u>Ple</u>		ss days after
		Submission to req	uest omciai transci	<u>ipis.</u>	
		For Offi	ice Use Only		
☐ Busine	ess/Cashier's Office	Receipt #		_	
	s to be changed an				
1 —	st for Transcripts s				
	ubmitted:)ate processed:		
					
NOTES.					