

**College of the Desert
Matriculation Exemption Request**

Purpose of this Form

In accordance with Title 5 §55520, students who plan to enroll at College of the Desert are to be provided with matriculation services such as assessment, orientation and counseling/advising services. Pursuant to Title 5 §55532, students may be exempt from the assessment, orientation, and/or counseling components of matriculation if they meet certain criteria. ***This form is to be used by students who believe they should be exempt from assessment, orientation and/or counseling/advising services.*** (Please note that students will not be exempt from the admissions application and follow-up components of matriculation.)

Instructions

- Please complete the information below, identifying the reason(s) for your exemption request and attaching copies of any documents that may help to support your request.
- Once completed, fax the request and supporting documents to (760) 862-1330 **ATTN: Matriculation Officer**. You may also submit these materials in-person to the front desk of the COD Counseling Center.
- Once reviewed, you will be contacted via e-mail or telephone with information about the next step(s) in the registration process.
- Please allow a minimum of 2 business days for processing

Name: _____

Student ID Number: _____

Phone/Cell: _____

E-Mail: _____

I am requesting an exemption of the following matriculation services (check all that apply)

- Assessment Services
- Orientation Services
- Counseling/Advising Services

This request is based on the following reason(s) (check all that apply)

Reason	Minimum Supporting Information
<input type="checkbox"/> I have attained an AA/AS degree or higher	Unofficial college transcripts or copy of college diploma
<input type="checkbox"/> I have previously taken college level coursework in English, Math, and/or Reading	Unofficial college transcripts
<input type="checkbox"/> I have completed a minimum of 15 college units	Unofficial college transcripts
<input type="checkbox"/> I have previously taken a course placement assessment at another CA Community College	Copy of assessment score report and course placement report (must include school name on score report)
<input type="checkbox"/> I plan to take a course(s) with no pre-requisites	List course(s): _____ _____
<input type="checkbox"/> I do not plan to earn a degree/certificate at this time	Initial here: _____
<input type="checkbox"/> I do not plan to take more than 12 units at this time	Initial here: _____

I certify that the information provided is true and correct to the best of my knowledge. I understand that by visiting the Counseling Center I may request to participate in these matriculation components at a later date. I also understand that I can obtain information about College policies, procedures and services by visiting the College website at www.collegeofthedesert.edu.

Signature: _____

Date: _____

FOR OFFICE USE ONLY

Reviewer:	Approved: A O C ALL	Denied: A O C ALL
Notification by:	Date:	Method: Tele Email