



**Amarillo College**  
Registrar's Office

\_\_\_\_\_  
Date

**PETITION FOR CREDIT EARNED BY PROFESSIONAL  
LICENSURE / CERTIFICATION**

\_\_\_\_\_  
Last Name of Petitioner      First Name      MI      Social Security Number

Mailing

Address: \_\_\_\_\_  
Number and Street      City      State      Zip Code

\_\_\_\_\_  
Major

\_\_\_\_\_  
Date

\_\_\_\_\_  
Advisor's Approval

Type of License / Certificate: \_\_\_\_\_  
(Must be current per State, Federal, or Association Rules)

Amarillo College  
Course Name and Number

Semester Hours  
Credit

Posting Fee  
\$15.00 Per Course

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Fees: \_\_\_\_\_

\_\_\_\_\_  
Date Paid

\_\_\_\_\_  
Amount Paid

\_\_\_\_\_  
Cashier

**PLEASE READ BEFORE SIGNING**

Credit awarded for Professional Licensure/Certification will not be entered on the student's academic record at Amarillo College unless the student is **officially enrolled for the current semester** with a declared major appropriate for the credit. **Credit received by examination may or may not transfer to a four year University. Please check with your transfer institution prior to applying for credit.**

Signed: \_\_\_\_\_  
Petitioner

Approved:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Registrar

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean of Academic Affairs

Updated on 11/07