



Request for Course Review For PTA Prerequisites

Name: _____

Phone: _____

Email: _____

Address: _____

Olympic College Course Equivalent

Please Check the appropriate box(es) below.

<input type="checkbox"/>	BIOL& 175
<input type="checkbox"/>	PHYS 110
<input type="checkbox"/>	CHEM& 121
<input type="checkbox"/>	BIOL& 241
<input type="checkbox"/>	BIOL& 242

Please provide **Unofficial Transcript and Course Syllabus with Lab clearly marked** for each course that needs reviewing:

Courses you want evaluated(highlighted on your unofficial transcript)	
<i>College/University</i>	<i>Course Name/Number</i>

☐ **Course Syllabus Enclosed**