



San Diego Community College District
Counselor Assessed Skill Levels
 Assessment Tests from Other Institutions

DRAFT
SSC – 10/25/18
 Note: Change to half
 sheet/glue pads

City/ECC Mesa Miramar Fall Spring Summer Year: _____

Student Name: _____
 (PRINT) Last First MI

Student ID Number with the San Diego Community College District: _____

Name of Institution where test was taken: _____

Eligible Skill Levels: RDG: _____ WRT: _____ MTH: _____ ESL: _____

 Counselor Name (PRINT) Counselor Initials Date

Distribution: Counseling Office

SS-CSLRASDSKLLVL 10/2018

INSTRUCTIONS

- ~~Student takes assessment test results from “Other Institution” to Counseling Office for counselor assessment.~~
- ~~Student is given form and completes CSID, Name and Institution where test was taken.~~
- ~~Counselor completes Skill Level fields based on test documentation provided by student.~~
- ~~Counselor prints name, initials and dates form.~~
~~Counseling Office inputs skill levels into ISIS via SQAB screen.~~
~~Documentation and form is imaged for access in Web Extender.~~



San Diego Community College District Deferment Application/Contract

DRAFT SSC – 10/25/18

- City
- Mesa
- Miramar

All questions must be answered before your application will be received.

Please use **black or blue ink and print clearly** ~~a ball point pen and press hard, as you are writing through several copies.~~

Name: _____ Student ID Number: _____
 Address: _____
 Telephone: (Home) _____ (Work) _____ E-mail: _____
 Annual Income: _____ Place of Employment: _____
 Name of Supervisor: _____ Source(s) of Income: _____

Financial Aid and Registration Information (Appropriate documentation must be attached)

I will be receiving: (Check all that apply) Date Applied: _____ Amount: _____

- Pell Grant
- ~~BOGW-CCPG~~
- Federal Direct Loan
- Military Educational Benefits (Montgomery GI Bill, Military Assistance Program)
- Other: _____

Are you a California Resident? Yes No Semester of Registration: Spring 20_____ Fall 20_____

I plan to register for _____ units this semester. Date of Registration: _____ Amount to be Deferred: _____

In the space below, provide an explanation of extenuating circumstances that require you to defer your fees (**be specific**).

I plan to repay the deferment ~~(amount and date)~~ in the amount of: _____ by the following date: _____

Please read and initial all of the following statements:

_____ I acknowledge and certify that the above information is accurate and correct and further recognize that falsification of any information is grounds for disqualification. If approved for a deferment, I agree to make a partial payment of 50% of the total fees due upon submission of this application, and final payment by the date indicated in the payment schedule in the box below.

_____ If I am administratively dropped after census because my deferred payment deadline is past census, I will receive a "W" in each of the courses I am currently enrolled in this semester on my academic record, which may affect my academic standing, as well as my financial aid eligibility.

_____ I understand that I am still responsible for this financial obligation even if I drop, stop attending, or never attended classes, or am administratively dropped from classes after the refund period.

_____ I understand that if approved, the deferred balance will not show on my **Reg-emySDCCD** account; therefore, all payments must be processed in the Accounting Office.

_____ I understand that if I have pending financial aid loans, I will be notified by the Accounting Office that the check is ready for my endorsement, and that funds will be used to first pay the deferred fees and any remaining balance will be processed no later than 10 business days.

_____ I understand that if approved, any increase in my enrollment level is not covered under this agreement and all additional tuition and fees must be paid in full.

Student Signature: _____ Date: _____

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Total Amount Deferred: \$ _____ Payment Due Date: _____
 Approved Denied Signature of Dean: _____ Date: _____

GENERAL INFORMATION:

- Deferments are for tuition and enrollment fees and are only based upon extenuating circumstances. This does not include the health fee, A.S. card, or other fees.
- Students **must be currently enrolled** in courses at the college to which they apply for a deferment. A student may only apply for a deferment at the college where the majority of the classes are held.
- This requires a 2-4 day processing period. Last minute requests may not be processed. No deferments will be considered after the submission deadline. Requests for extensions will not be considered.
- To be considered for a fee deferment, students must first apply for financial aid.
- Students who qualify for the CCPG, formerly known as a-BOGW fee waiver, will not be eligible for a deferment. Visit the Financial Aid Office for more information.
- Deferment requests will be reviewed by the Office of Student Affairs. Supporting documentation reflecting that financial resources are pending must be included with the application. If approved, it becomes a contract between you and the college as to how you will pay your registration by the designated deadline.
- It is your responsibility to contact the Student Affairs Office if you wish to cancel the deferment.
- All payments for deferred fees must be made by the payment due date specified on the deferment contract, or you will be dropped from classes.
- **IMPORTANT: If you are administratively dropped after the census date because your deferred payment deadline is past census, you will receive a “W” in each of the courses you are currently enrolled ~~on your academic record.~~ If that were to happen, both which may affect your academic standing, and as well as your financial aid eligibility may be affected.**
- Deferment payment delinquency is cause for future deferment ineligibility.
- An administrative hold will be placed on your record if you do not meet the conditions of an approved this-deferment.

PROCESS:

Student should complete application and be prepared to:

1. Clear any holds on your account. **No exceptions.** Contact the appropriate department to clear them.
2. Pay **50%** of total tuition/enrollment fees plus the mandatory health fee.
3. Pay the deferred amount in full by the **Payment Due Date** specified on your deferment contract.

Deferments are not automatic. Follow-up with Student Affairs staff to find out if your deferment was approved by the Dean of Student Affairs.

DEFERRED FEE PAYMENTS CAN BE MAILED TO THE FOLLOWING: (Do not mail cash payments)

SAN DIEGO CITY COLLEGE
Attn: Accounting Office
1313 Park Boulevard
San Diego, CA 92101

Room ~~D-406~~ A-256

SAN DIEGO MESA COLLEGE
Attn: Accounting Office
7250 Mesa College Drive
San Diego, CA 92111

Room I4-106

SAN DIEGO MIRAMAR COLLEGE
Attn: Accounting Office
10440 Black Mountain Road
San Diego, CA 92126

Room ~~C-303~~ K1-205



San Diego Community College District
Employee Acknowledgement of
Confidentiality of Student Records
and Computer Passwords

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- The Family Educational Rights and Privacy Act (FERPA) of 1974 is a federal law that protects the privacy of student education records. State and federal law, and District policy prohibit the release of any information and/or student records (verbally, in writing, or by any other means), without the written consent of the student, a court order, or a lawfully issued subpoena, unless there is specific statutory authorization*. This restriction includes students who are minors.
All requests for information due to an emergency must be referred to the manager, or individual in the supervisory position.
Law enforcement officials (internal and external) do not have the right to access student records information. Requests for student information by law enforcement should be referred to a manager.
District computer passwords are confidential and are to be used by the assigned employee only. Passwords are not to be shared, loaned, or made known to any other individual, including the individual's manager or supervisor. It is the employee's responsibility to ensure the security of his/her/their password. When the employee leaves their computer workstation for any period of time (i.e. breaks, lunch, meetings, etc.) he/she/the employee should log off the computer.
The undersigned employee acknowledges that he or she has they have read this "Employee Acknowledgement of Confidentiality of Student Records & Computer Passwords" the above in its entirety. Violation of the confidentiality requirements with respect to access and a release of student records, student information, or passwords, may result in disciplinary action up to and including dismissal.

Employee Name: _____

Employee Signature: _____ Date: _____

College/Campus of Employment: _____ Department: _____

Supervisor/Manager Signature: _____ Date: _____

* Family Rights and Privacy Act, Public Law 93-380; Title 5 California Code of Regulations, Section 54600 et. seq; District Procedure 3001.1.

DISTRICT USE ONLY
Date Password Assigned Security Administrator Signature



The San Diego Community College District Mandated Training Course Repetition

DRAFT
SSC – 10/25/18

City Mesa Miramar ECC Spring Summer Fall Year: _____

Name: _____ Student ID Number: _____
(PRINT) Last First MI

Address: _____ Telephone: ~~Day~~ ~~Even~~ _____
Street City State Zip

Subject/Course: _____ Course Reference Number (CRN): _____
(i.e. SPAN 102)

Legally mandated course: The District is authorized to permit additional repetitions of legally mandated courses required as condition of continued paid or volunteer employment. Legally mandated courses are defined as courses mandated by a state or federal agency for licensure, certification or training as a requirement to continue employment.

Agency with mandated training requirement: _____

~~Be sure to attach ATTACH~~ evidence indicating that the course is required in order to meet a legal mandate for continued employment. (Example: letter from agency, certification about to expire, departmental certification, other documentation from agencyplace of employment.)

Distribution: ~~White: Original~~— Campus; ~~Canary~~: Copy—Student Services, State Reports



San Diego Community College District
Petition for Academic Renewal without Course Repetition

DRAFT
SSC – 10/25/18

City Mesa Miramar

Name: _____ Student ID Number: _____
 (PRINT) Last First Middle

Address: _____ Birth Date: _____
 Street City State Zip

E-mail: _____ Telephone: _____

List All Previous Colleges Attended:

Please choose one of the two options below with a maximum of one semester/session or 12 units, whichever is greater.

a) Semester/Session to be disregarded from GPA

Semester/Session	Year	Units	Institution

OR

b) Course(s) to be disregarded from GPA

Course # (e.g. HIST 100)	Semester and Year	Units	Institution

➤ **Requirements for consideration** (*Student must meet all conditions below*)

1. Course(s)/Semester/Session must be substandard (below 2.0 GPA).
2. Transcripts from all institutions attended must be officially on file.
3. Successfully complete, in a regionally accredited college or university, 15 units with a GPA of at least 2.0 subsequent to the coursework to be disregarded. All courses taken during the semester/session in which the student reaches or exceeds the 15 unit minimum will be used in computing the 2.0 GPA.
4. One year must have elapsed since the most recent coursework to be disregarded was completed.

I request to have the above substandard coursework disregarded because it is not reflective of my present ability. I have read the policy on the reverse side of this form. I understand the implications of this policy and have reviewed those implications with the counselor. I further understand that the action is irreversible once approved.

Student Signature: _____ Date: _____

Counselor Name: _____ Signature: _____ Date: _____

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Approved Denied

Comments: _____

Evaluator Signature: _____ Date: _____

Posted by: _____ Date: _____

District Regulations Governing Academic Renewal without Course Repetition

1. A maximum of 12 units or one semester/session may be disregarded, whichever is greater. For purposes of academic renewal for summer session work, a summer session will be defined as all courses which commence after the termination of the spring semester and end prior to the commencement of the fall semester. Intersession work will be included in spring semesters. Short-term or carry-over classes will be considered to be part of the semester or session in which credit is awarded or a grade is recorded to the student's permanent record.
2. If grade alleviation has already been applied two times for a course, the course will not be eligible for academic renewal without repetition and will remain on the academic record.
3. If previous action for academic renewal has been applied to coursework included in the semester to be disregarded, the course will not be eligible for academic renewal without repetition and will remain on the academic record.
4. Work taken at another institution may be alleviated in our computations for purposes of graduation from one of the District colleges under the regulations stated above.
5. The permanent academic record will be annotated in such a manner that the record of all work remains legible, ensuring a true and complete academic record.
6. Recalculation of the grade point average may be used toward qualification for graduation with honors.
7. Academic standing for the semester/session(s) will not be adjusted.
8. Academic renewal without repetition may only be applied to 'F' grades for courses taken prior to a degree ~~or certificate~~ awarded.

