



School of Mathematics, Science, and Engineering Math Placement Waiver Form

Visiting students who have been approved to take a mathematics course at their home institution may request placement into the equivalent course at SUNY Westchester Community College using the attached Waiver Form.

This process allows SUNY WCC to honor course approvals made by another college or university. Please follow the steps below carefully.

Step 1 – Complete Section A of the Placement Waiver Form.

You will be asked to provide:

- Your SUNY WCC ID number
- Contact information
- The SUNY WCC mathematics course you wish to take (example: MATH 181 – Calculus I)
- The class number of the course section

After completing Section A, send the form to the appropriate office at your home institution (for example: counselor, placement center, registrar, or mathematics department)

Step 2 – Home Institution Completes Section B.

An authorized official at your home institution must complete Section B of the form.

They will:

- Confirm the course placement or approval at their institution
- Indicate how the placement was determined
- Attach any official documentation supporting the placement

Step 3 – Home Institution Submits the Form

Once both sections are complete:

- The form must be emailed by your home institution
- The email must come from an official institutional email address

The completed form and documentation should be sent to: visitingstudentregistration@sunywcc.edu

Forms sent directly by students will not be accepted.

Questions

If you have questions about this process or the mathematics placement request, please contact:

Professor Matthew Rogala
Chair, Mathematics Department
Matthew.Rogala@sunywcc.edu



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For visiting/non-matriculated students who want to enroll into a WCC course and have completed placement at another institution.

INSTRUCTIONS

Student: Complete Section A and submit to the appropriate office at your Home Institution.

Home Institution: Complete Section B and send file as an attachment from your official school e-mail to visitingstudentregistration@sunywcc.edu

SECTION A

Date: _____

Student Name: _____

Student WCC ID# (9 digits): _____ Phone Number: _____

E-mail Address: _____

WCC Course in which you would like to enroll:

Course Name	Course Subject/Number (i.e. MATH 181)	Class Number (i.e. 5123)

SECTION B

School Name: _____

Course Placement: _____

Method in which the student was placed (include appropriate official documentation):

Additional Comments: