

SECTION B

Prerequisite courses completed at other regionally accredited United States colleges or universities must be equivalent to San Joaquin Delta College courses. For official determination of course equivalency, course descriptions must accompany transcripts (in original sealed/unopened envelope). **Official transcripts and course descriptions for prerequisite courses MUST be submitted with this prerequisite verification.**

A minimal cumulative GPA of 2.5 on prerequisite courses is required. **In addition**, all prerequisite courses must be completed with a grade of "C" or better, and final grade must be posted to transcript. For courses in which a grade of "C" or better was earned, the **EARLIEST** course grade will be utilized per college policy. Failure to submit transcripts with all grades posted will result in disqualification of the prerequisite verification.

1. **BIOL 31, Human Anatomy**
(Prior to Fall 2000 this course was listed as ANAT 1)

_____ Grade earned
___ San Joaquin Delta College
___ Other:
Name of Institution _____
Class Name & Number _____
Semester/Quarter Taken _____

OR

- BIOL 33, Anatomy & Physiology**
(Prior to Fall 2000 this course was listed as ANAT 2)

_____ Grade earned
___ San Joaquin Delta College
___ Other:
Name of Institution _____
Class Name & Number _____
Semester/Quarter Taken _____

2. **HS 19/FCS 19, Human Development**
(Prior to Fall 1995 this course was listed as HS 42, Life Cycle in Perspective)

_____ Grade earned
___ San Joaquin Delta College
___ Other:
Name of Institution _____
Class Name & Number _____
Semester/Quarter Taken _____

3. **HS 36, Medical Terminology & Speech**

_____ Grade earned
___ San Joaquin Delta College
___ Other:
Name of Institution _____
Class Name & Number _____
Semester/Quarter Taken _____

4. **PSYCH 1, Introduction to Psychology**

_____ Grade earned
___ San Joaquin Delta College
___ Other:
Name of Institution _____
Class Name & Number _____
Semester/Quarter Taken _____

SECTION C

VERIFICATION OF COMPLETED APPLICATION

Read the following carefully and **initial** each line to verify that each item is completed and/or included with this Prerequisite Verification to the Psychiatric Technician Program.

- 1. Prerequisite Verification is correctly and completely filled out. _____
- 2. Application for Admission to San Joaquin Delta College is currently on file with the correct address of my current residence. _____
- 3. **For all courses taken at colleges other than San Joaquin Delta College, official transcripts in original sealed/unopened envelopes from all colleges are submitted with this prerequisite verification.** _____
- 4. **For all courses taken at colleges other than San Joaquin Delta College, course descriptions for prerequisite courses taken at regionally accredited United States colleges are submitted with this prerequisite verification.** _____
- 5. A copy of candidate's birth certificate or driver's license is submitted with this prerequisite verification. _____
- 6. One of the following is included with this Prerequisite Verification in a sealed envelope:
(Please indicate with a "X" what documentation you are submitting) _____
 - ____ Official high school transcript
 - ____ Official GED or High School Proficiency Certificate
 - ____ Official college transcript for AA/AS degree from a U.S. regionally accredited college other than San Joaquin Delta College
 - ____ Official evaluation of coursework from a foreign university by a NACES evaluation service to meet high school requirement.
- 7. **I understand that all correspondence regarding this Prerequisite Verification will be sent utilizing my San Joaquin Delta College student e-mail address. It is my responsibility to review and respond to e-mail in a timely manner and within prescribed timelines. I further understand that failure to review and respond to student e-mail within prescribed timelines may result in disqualification of my prerequisite verification.** _____
- 8. I have made a copy of this Prerequisite Verification for my records. _____
- 9. I understand that my Prerequisite Verification cannot be processed if I owe fees or am not in good standing with San Joaquin Delta College. _____

I acknowledge, by my signature below, that I have read this entire document. I further acknowledge that all required documents have been submitted with this Prerequisite Verification. **I understand that missing information will result in disqualification of my Prerequisite Verification, and that I will be unable to submit another prerequisite verification for this filing period.**

Signature

Date

Printed Name

For Office Use Only:	
_____ Received by	_____ Date Received