

One Semester Waiver of Orientation and Assessment

Monterey Peninsula College

Form B

Complete this form if you need a temporary waiver from the orientation and assessment requirement. Please complete this form and return it to the Counseling office or fax it to the Counseling office at: (831) 646-4015.

Name: _____ **ID#** _____
Last **First**

Phone: _____ **Email:** _____

Date: _____

I understand that this temporary waiver is granted to students who cannot complete the assessment and orientation process for reasons beyond their control. I also understand that I must complete the assessment and orientation processes within the first 8 weeks of my first term of enrollment or priority will not be granted.

Assessment

Orientation

By checking this box it means that I declare under penalty of perjury that all information in this form is correct.

For Office Use Only:

Date/Staff Initials

After 8 weeks:

Yes ___ No ___ Orientation complete
If "No" priority will not be granted for next semester.

Yes ___ No ___ Assessment complete

Date/Staff Initials