



PRE-REQUISITE RELEASE FORM
VENTURA COLLEGE ASSESSMENT OFFICE

Termed Cleared for: Spring Summer Fall

Name: _____ VC ID: _____

Phone No.: _____ DOB: _____

Course Title: _____ Course ID: _____

Justification: Transcripts _____ Other _____

Approved by: _____ Date: _____

Entered Banner by: _____ Date: _____

(wp/Prerequisite releaseform rev: 06/07/12)



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