

# Mathematics Course Placement

COLLEGE OF ARTS AND SCIENCES  
**ADVISING AND ACADEMIC SERVICES**  
THE OHIO STATE UNIVERSITY

Name \_\_\_\_\_  
Last First Middle

Ohio State ID \_\_\_\_\_ SAT Math Score \_\_\_\_\_ Date taken \_\_\_\_\_

name.# \_\_\_\_\_ ACT Math Score \_\_\_\_\_ Date taken \_\_\_\_\_

Matriculating Term/Year \_\_\_\_/\_\_\_\_ Ohio State Math Placement  
Score \_\_\_\_\_ Date taken \_\_\_\_\_

Student Elected Course \_\_\_\_\_

Advisor Recommended Course \_\_\_\_\_ AP Math course: AB / BC  
Score \_\_\_\_\_ Date taken \_\_\_\_\_

By signing below, I acknowledge that

1. I was advised to take the course noted above but have elected not to follow that advice.
2. I take full responsibility for the possible consequences of enrolling in a higher-level course than the course determined by my placement score and recommended by my advisor.
3. I will not attempt to use my lower placement as justification for action to retroactively adjust my record if I do not perform well in the course I elect to take.

\_\_\_\_\_  
Student signature date

\_\_\_\_\_  
Advisor signature date

\_\_\_\_\_  
Advisor printed name Department