SANTA BARBARA CITY COLLEGE APPLICATION FOR SKILLS COMPETENCY AWARD

Program: Acute Care Certified Nursing Assistant Home Health Aide Esthetician I Esthetici Other (specify program name[s]): All coursework for the award has been completed or is in progress at SBCC: Yes No* *Official external transcripts and petitions for waivers/substitutions must be submitted to Admissions & Records Mailing Address for Award*: *EMT Awards are distributed in person at the last course meeting. If needed, mailing will be processed by the Allied Health departmen Award applications are not required for this program. Student Signature:	Student Name:					SBCC ID: K	SBCC ID: K		
Program: Acute Care Certified Nursing Assistant Home Health Aide Esthetician I Esthetici Other (specify program name[s]):	Student Nam	ne to Display	on Printed	d Award:					
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	721 Cliff [Dr							
Office Use Only Audit: Approved Award Date Denied Processed by:	For inform	nation about	awards, se	e <u>http://www</u>	v.sbcc.edu/dipl	omas			
	Office Use	e Only Audit:	А	pproved	Award Date	Denied	Processed by:		

Last revised 11/17/25