

Prior Learning Credit Application

Section A: Student Section

Instructions: Complete a separate application for each course. Submit application to your program advisor.

Name: _____ EMPLID: _____
E-Mail: _____ Course: _____

Indicate the method by which assessment of prior learning credit is appropriate:

___ Military transcript evaluation ___ Experiential Learning Portfolio
___ CLEP exam; other credit by exam ___ Professional Training/Certificate/License

By signing this application for prior learning credit, I verify that I am aware of the process and related fees for the selected assessment method. In addition,

- I agree to work with my advisor and the prior learning facilitator to provide evidence of prior learning commensurate with a college course.
- I understand the credit is not guaranteed, and I resolve to pay all fees associated with the selected prior learning assessment method.
- I know that I must be enrolled in a DCB program and have completed (or be registered for) 15 credits of coursework from DCB to earn prior learning credit.
- I understand that prior learning credits do not count toward DCB residency requirements for graduation, and that a minimum of 15 credits from DCB (other than prior learning credit) is required to graduate.
- I understand that some prior learning credits are not used to calculate GPA. These include: CLEP exams, military transfer credits, and professional certificates or licenses. A 2.0 GPA or higher must be earned on remaining coursework for graduation.

Student signature

Date

Section B: Program Advisor Section

Instructions: Complete the checklist of activities listed. Sign and submit the application and supporting evidence to the prior learning facilitator.

By signing this application, I verify the following related to the student and the assessment process.

- DCB program of study: _____
- Semester in which student completed, or will complete, 15 credits of coursework from DCB: _____
- Evidence exists that the student has prior learning commensurate with college coursework.

Check any of the following that can be provided or is needed to verify prior learning knowledge.

- Military transcript
 Credit by exam scores
 Professional training, certification, or license
 Assessment via an "experiential learning portfolio"

Semester during which credit is to be recorded (if approved): _____

Advisor signature

Date

Section C: Prior Learning Coordinator Section

Date Application Received:

Assessment Method:

Student admitted/enrolled: yes / no

Semester of record:

Residency requirement completed: yes / no

Course Prefix/Number/Title:

If no, expected semester of completion:

Number of Credits:

Course prerequisites have been met: yes / no / NA

Grading Scheme: S/U or ABCDF

Recommendation – Award Credit: yes / no

Evaluator:

Rationale (Evidence Attached):

Prior Learning Coordinator signature

Date

Section D: Administrative Approval Section

Approve

Deny

Associate Dean of Academic Affairs signature

Date