Request for Prior Learning Assessment

Name: _____ **I.D. Number:** _____

Phone: _____ **E-mail:** _____

Date: _____

Semester Enrolled in UNIV 200 _____
(The student must be currently enrolled or have taken it within the past year.)

Course Prefix, Number, and Title covered by this request:

_____

Instructor and Date of the DSU syllabus used as a guide for assembling materials:

_____

For the Faculty Evaluator:
The information assembled in the accompanying portfolio is meant to demonstrate that the student acquired college-level learning in a non-collegiate setting. Students are advised they will receive credit not for their life experiences but for the knowledge of academic theory and concepts and the application skills that their experiences allowed them to gain. You may contact the student for additional information, if necessary.

Attach a list of the learning outcomes from the syllabus noted above for the requested course and provide an assessment of the student's knowledge/skills in relation to each learning outcome as demonstrated by their portfolio. The value of each learning outcome in relation to the whole must be consistent with the values employed by the syllabus used as a guide for the portfolio. Also, please address how the length of time the student has spent on developing outcome related knowledge and skills compares to credit hour requirements: 1 credit = 45 hours.

Based on an assessment of the above student's Prior Learning Portfolio, I recommend the following award of credit:

Prefix	**Course No.**	**Course Title**	**Semester Hours**

A recording fee of 50% of regular per semester hour residency tuition (non-refundable, to be paid at the time of registration) will be charged to have Prior Learning Assessment credit placed on student transcript.

_____
Student Approval Signature Date

_____
Faculty Approval Signature Date

_____
Chair Approval Signature Date

_____
Dean Approval Signature Date