

OFFICE OF RECORDS AND REGISTRATION 720 4th AVENUE SOUTH, AS 118 ST. CLOUD, MINNESOTA 56301-4498 PHONE: (320)308-2111 FAX: (320)308-2059 registrar@stcloudstate.edu

CREDIT FOR PRIOR LEARNING REQUEST

Note: Students will be charged a fee when credits are approved

Step 1: Student-Review website before completing form.

Step 2: Student-Complete information below:

Name	SCSU ID	_ SCSU ID		
Address				
Street	City	State	Zip	
Daytime Phone ()	Email		@go.stcloudstate.edu	

List course proposed for credit. Assessment and term may not be retroactive. Consult with advisor to identify possible course options (maximum of 21 semester credits).

Department	Course No.	Course Title	Credits

Step 3: Records and Registration (Submit form to the Office of Records and Registration (in AS 118) to confirm your eligibility for an assessment)

Rec	cords and Registration Signature:	Date:			
	By checking this box, you consent to use electronic signatures rather than paper documents.				
	Sufficient Grade point average overall (minimum 2.00 GPA)	🗅 Yes 🗳 No			
	Number of credits completed/enrolled at St. Cloud State University				
	Year/Term admitted to major				

Step 4: *Student*-Competence Statement (consult with faculty evaluator if needed) Attach written competence statement to this application.

A competence statement is a description of a learning outcome that has been achieved in a given subject area. Your competence statement must identify the subject area, theoretical and practical elements of the subject, and either the level of your knowledge or how you apply your knowledge. An example of a competence statement is: <u>Operating Systems</u>: Knows history, theory, principles and techniques of operating systems well enough to compare features of different operating systems, analyze the behaviors of computer programs, and plan for the configuration and installation of operation systems.

Step 5: Student-Make a plan:

Meet with the chair of the department that offers the course to review your competence statement and to create an assessment plan which includes intended format, (written test, portfolio, paper, etc.) course outcomes, evidence of outcome attainment, and the intended faculty reviewer. **Attach the plan to this application.**

		Recomm	ended fa	aculty reviewer_					
		Chair ap	proves th	ne plan 🛯 Yes	🛛 No If no, no	tify student	about the reason.		
	By checking this box, you consent to use electronic signatures rather than paper documents.								
	Chai	r's signature					Date		
01			- 4		4				
Step	0 6: F a	acuity Evalu	ator-Eva	aluator Comple	etes:				
	How	will the stud	ent be e	valuated? Check	k all that apply.				
	D P	ortfolio revie	w	Challe	nge exam		Other		
Step	0 7: D	ean-Review	s the pla	in:					
	Subr	nit form and	plan to t	he Dean for revi	ew.				
		Dean ap	proves th	ne plan 🛛 Yes	🛛 No If no, noti	fy chair and	I student about the r	eason.	
		Dean ap	proves th	ne reviewer 🗖 Y	∕es ◘ No If no,	notify chair	and student about t	he reason.	
		By checking	g this bo	ox, you consen	t to use electron	ic signatur	es rather than pap	er documents.	
	Dear	n's signature					Date		
Stor	Q. E	oulty Evolu	ator Po	view of evidend	201				
Oleh		-							
	Designated faculty member reviews the submission to determine if the student has met the course outcomes to a sufficient degree.								
		Satis	factory	# of credits aw	arded	Asse	ssment year/term		
		🛛 Unsa	tisfactor	y (no credits awa	arded)				
		lf uns	atisfacto	ory, notify studer	nt and department	t about the r	eason.		
		By checking	g this bo	ox, you consen	t to use electron	ic signatur	es rather than pap	er documents.	
	Facu	lty Evaluato	⁻ Signatu	ire			Date		
Step	9: F a	aculty Evalu	ator-Tra	inscription:					
		-		tment chair subi I by the student.		he Office of	Records and Regist	tration for transcription (<i>k</i>	łS
	Cost of credits : Upon transcription of approved credits the student will be assessed a fee equivalent to the cost of 1/3 credit for each credit assigned. (e.g. For an approved 3 credit course, a student will be charged for 1 credit.)							[:] 1/3	
		By checking	g this bo	ox, you consen	t to use electron	ic signatur	es rather than pap	er documents.	
	Offic	e Use Only:	Credit	s Awarded	(Date)				
	1				(Date)		Records and F	Registration Signature	