APPLICATION FOR CREDITS FOR PRIOR LEARNING

Office of the Registrar 2300 Ryan Road Courtenay BC V9N 8N6 T: 1-800-715-0914 E: forms@nic.bc.ca



Date

Date

Student's FULL name and address (print clearly)

NAME		NIC STUDENT NUMBER				
ADDRESS	CITY	PROVINCE				
COUNTRY	POSTAL CODE	PHONE NUMBER				
NORTH ISLAND COLLEGE PROGRAM						

In consultation with the Course Instructor, Department Chair and/or PLA Advisor, list the courses for which you are applying for credit.

COURSE CODE	COURSE TITLE			
			PLA TUITION FEE	
			 RECEIPT #	
			 RA SIGNATURE	
			 PLAR courses are not e	eligible for Financial Aid. We recommen
TOTAL CREDITS REQUESTED:				al Advisor before pursuing PLAR.

Faculty/PLA Advisor Signature

The information on this form is collected under the authority of the College and Institute Act, and will be used for the purposes of **assessment** and **reporting**. Inquiries about the collection or correction of personal information should be addressed to the Office of the Registrar, North Island College, 2300 Ryan Road. Courtenay, BC V9N 8N6

OFFICE USE ONLY: (Form to be completed by Program Faculty and PLA Coordinator) Faculty can enter grades directly into student record UNLESS the mark is DNC or F. Record those grades on this form only and submit.

COURSE CODE	CREDITS AWARDED	GRADE ASSIGNED	QUALIFIER / W.P.M.	DESCRIPTION OF PLA PROCES	SS USED (e.g. CHALLENGE EXAM, POR	TFOLIO ASSESSMENT etc.)
					-	
TOTAL CREDITS AWARDED:			I			
Grades entered						
Asse	ssed by (Print Name)		Assessed by Si	gnature	Date	
PLA	Coordinator (Print Nam	ne)	PLA Coordinat	or Signature	Date	
FOR SRO USE	ONLY					