

APPLICATION FOR CREDITS FOR PRIOR LEARNING

NORTH ISLAND COLLEGE



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

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
TOTAL CREDITS REQUESTED:	

PLA TUITION FEE	
RECEIPT #	
RA SIGNATURE	

_____ Student Signature

_____ Date

_____ Faculty/PLA Advisor Signature

_____ Date

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 PROCESS USED (e.g. CHALLENGE EXAM, PORTFOLIO ASSESSMENT etc.)
TOTAL CREDITS AWARDED:				

Grades entered

_____ Assessed by (Print Name)

_____ Assessed by Signature

_____ Date

_____ PLA Coordinator (Print Name)

_____ PLA Coordinator Signature

_____ Date

FOR SRO USE ONLY