

Request for Credit for Prior Learning

To be copied. Or, download from: <http://www.uwgb.edu/oira/cfpl/portfolio/CPLrequest.pdf>

Part A. To be completed by the student

Name: (Last, First, M.I.) →			
Street Address:			
City, State, Zip:			
Telephone Number:			
Student Number:		Major and Year:	
Cumulative UWGB GPA:		Credits earned at UWGB:	

Part B. To be completed by the student

UWGB course(s) for which you are seeking credit

Part C. To be completed by the reviewing faculty member and chairperson

Course #	Course Name	# of credits	Approved/ Grade	# of credits	Course Awarded	Faculty/Chair Signature & Date
Example: BUS ADM 202	Business & its Environ	3	<input type="checkbox"/> Yes <input type="checkbox"/> No Grade: _____	_____	<input type="checkbox"/> Course:	
			<input type="checkbox"/> Yes <input type="checkbox"/> No Grade: _____	_____	<input type="checkbox"/> Course:	
			<input type="checkbox"/> Yes <input type="checkbox"/> No Grade: _____	_____	<input type="checkbox"/> Course:	
			<input type="checkbox"/> Yes <input type="checkbox"/> No Grade: _____	_____	<input type="checkbox"/> Course:	
			<input type="checkbox"/> Yes <input type="checkbox"/> No Grade: _____	_____	<input type="checkbox"/> Course:	

Testing Services
Cofrin Library 835
Rev. 10/11

OFFICE USE ONLY:

Initial Fee: _____

Final Fee: _____