

Student Name First MI Last ACC ID#

Part 1. Visit with ACC Department Chair to discuss PLA options for review. Attach ACC unofficial transcript from WebACCESS.

ACC Course Prefix	ACC Course #	Sem. Hours	Source: PLA Credit to be Evaluated (check appropriate box and provide grade for mirror coursework and departmental exam)			
			CEU/WECEM "Mirror" Coursework	Industry Certification	Career Portfolio (Work Experience)	ACC Departmental Exam

Part 2. Student Eligibility and Criteria: Submit Application to College and Career Pathways Office (A227).

1. PLA credit may be awarded when the student has successfully completed a minimum of 3 hours of ACC course work and is currently enrolled after the census date of the requesting semester.
2. PLA credit will only be awarded as it applies to a current ACC program of study.
3. PLA is noted with a grade of "S" for the semester hour value and is not calculated in the institution's grade point average (GPA). Credit by Departmental Exam will be noted with a grade of A, B, or C on the transcript, and will not be calculated in the ACC GPA.
4. A maximum of 24 hours can be awarded for prior learning. These hours will not be counted toward resident credit, with the exception of ACC Continuing Education Mirror courses.
5. Award of prior learning assessment at ACC does not guarantee transfer of such credit to other colleges and universities.

I understand I am responsible for determining transferability of this credit by contacting the institution(s) to which I plan to transfer. I have submitted official records and documents for evaluation to the Office of College and Career Pathways.

Student Signature and Date

CCP Official Signature and Date

CCP Recommendation: [] Review Approved [] Review Denied

Part 3. Fees: The fee for each **evaluation** is \$10.00 per credit hour for departmental exams; \$100 per skills assessment. Request for evaluation does not guarantee college credit. The evaluation fee is non-refundable and is payable at the Cashier's window in A-Bldg. _____ (Student initials).

Evaluation Total: _____ CCP Initials: _____
Business Office/Cashier's Window: Amount Paid \$ _____ Receipt Number _____ Received by _____ Date _____
\$ _____ per credit for exam \$ _____ per skills assessment

ALVIN COMMUNITY COLLEGE STAFF ONLY

Part 4. To be completed by the ACC Department Chair (checklist per SACS criteria):

- ☐ Attach documentation of content and level of instruction (if applicable).
- ☐ Attach documentation of faculty qualification to teach at appropriate degree level (if applicable).
- ☐ Attach American Council on Education or National College Credit Recommendation Service documents (if applicable).
- ☐ Attach documentation of equivalency of clock hours to ACC credit hours. (i.e. 15 clock hours = 1 ACC SCH) (if applicable)

Signatures below indicate verification that credentials/evidence presented meet criteria for award of credit.

Department Chair Signature and Date

Dean Signature and Date

CCP Documentation Review: [] Complete _____ (Initials)

Vice President of Instruction: [] Approved [] Denied

VPI Comments (if applicable):

VPI Signature and Date

Comments:

Registrar's Office: Date Transcribed _____

Posted by _____

Student Informed via email on _____