



## REQUEST FOR EXPERIENTIAL LEARNING CREDITS

Name:  
 Address:  
 Academic Major: Information Science

T#: T00  
 Telephone:  
 Advisor:

- Credit for Compressed Course/Program:
  - Include detailed explanation of request and summary of relevant course/program documentation
  - Attach certificate/record of training and description of course of study
- Credit for Training/Certification:
  - Include detailed explanation of request and attach copy of transcript.
  - Attach certificate/record of training and description of course of study
- Credit for Work Experience –
  - Include letter explaining request and summary of work experience (See Resume)
  - Attach detailed summary of activities, including:
    - Letters from employer confirming work experience
    - Relevant examples of work

Did information available support request for credit?

Did interview support request for credit?:

Comments:

Course Number	Course Title	Credit Hrs Awarded

Review Committee Chair: \_\_\_\_\_ Advisor: \_\_\_\_\_

Department Chairperson: \_\_\_\_\_ Date: \_\_\_\_\_

Dean: \_\_\_\_\_ Date: \_\_\_\_\_

Copy: Department / Dean's Office / Records