

National Park College Prior Learning Portfolio Assessment Request Form

NPC students who wish to earn Prior Learning Assessment (PLA) credit through Portfolio Assessment should visit the Division Chair or Dean of the academic department recommending credit to discuss possible course options and/or specific requirements or expectations. Students should also visit the Director of Career Services to learn how to assemble and present their work. Interested students should visit with the Career Center prior to paying the assessment fee to learn expectations and work involved with earning credits through PLA.

Student Name _____ Student ID# _____

Phone _____ Email Address _____

Program of Study _____

List the course(s) for which you are requesting PLA credit consideration:

Course ID	Course Name	Number of Credits

How many credits have you previously earned through Credit by Examination, Portfolio Assessment, or transfer credit? _____

Portfolio Assessment Fee: NPC charges a nonrefundable fee for a portfolio assessment to earn credit through PLA. The fee is \$125 for the first 12 credits reviewed (it is not a per-credit fee—it covers up to 12 credits), and then \$25 for each additional 6 credits reviewed. This fee is not dependent on the results of the assessment.

By signing this form, I understand I must submit this request along with the required documentation for my portfolio and pay the required portfolio assessment fee prior to consideration of credit. I understand payment of the required assessment fee does not guarantee I will receive PLA credit for the requested courses and that the fee is nonrefundable. I understand these hours do not count towards NPC's residency requirement for degree attainment. I understand NPC cannot guarantee transfer of credit awarded for prior learning to other institutions.

Student _____ Date _____

OFFICIAL USE ONLY:

Business Office: Payment Received By _____ Amount Paid _____ Date _____

Division Chair/Dean/Faculty: _____ Date _____

Approval: Yes _____ No _____

Comments _____

Faculty Evaluator _____ Date _____

****Division Chair, Dean, or Faculty must submit signed form to the Office of the Registrar for processing.**

Registrar _____ Date _____

Questions may be directed to the Registrar's Office - Phone: 501-760-4123 Fax: 501-760-4100