Request for Credit through Examination and/or Non-traditional Experience

Please fill out completely, print, obtain signature(s) and return to the Office of the Registrar.

Section I:

Location: (check one) □ San Antonio □ Houston □ Rio Grande Valley Date: __________

Name: ________________________________ Student ID #: __________________________

Address: ____________________________________________

Home Phone: (______) ___________________________ Cell/Work Phone: (______) ___________________________

Have you ever attended OLLU? (check one)

☐ Yes. Please give date of last attendance ☐ No. Please refer to item #1 below

Type of Credit Sought:

Content or Course Description/Title ____________________________________________ Semester Hours Seeking ____________________________

Are you seeking Upper Level (Junior/Senior) Credit? (check one) ☐ Yes ☐ No

Section II: Credit Request through (check all that apply)

☐ External Validation (check one)

☐ CLEP ☐ CLEP Subject ☐ Other: __________________________

What semester do you plan on taking this test? (enter year and circle term) ___________ Fall Summer Spring

If planning to take the clep examination, have you taken this exam before? ☐ Yes ☐ No

If yes, when? ____________________________ (year/term)

☐ OLLU Discipline Examination ($250 per semester hour as of time of examination)

☐ Military Evaluation

☐ Certified Career Evaluation (Please List): ____________________________________________

☐ Portfolio Evaluation of Life/Work Experience ($250 per semester hour as of application date)

I Understand that:

1. Admission to OLLU and completion of (3) semester hours at OLLU is a prerequisite to granting of credit through examination/non-traditional experience.
2. If charges are involved, payment to Student Accounts must be rendered before credit will be recorded: NOTE: Veterans Administration & Financial Aid will not apply for credit earned through examination/evaluation.
3. Credit will be recorded as “CR” (Credit) which is not computed in the grade point average.
4. After credit is recorded, I cannot request that it be removed from my record or my account adjusted in Student Accounts.
5. Any credits earned through any of the above sources cannot count as OLLU residence credit.
6. CLEP exams may NOT be repeated within three months of test date for same exam.
7. Credit and or Non-traditional experience must be taken one semester prior to graduation.

Student Signature: ________________________________ Advisor’s Signature ________________________________

Registrar Office Use Only

☐ Approved
☐ Denied Reason: ____________________________________________

Registrar Staff Initial’s __________ Date: ________________

Revised 8/2015
This side is to be completed by the appropriate University Official.

Please note the following:

- If no charges are involved, one copy of this form must be submitted to the Registrar’s Office.
- If charges are involved, two copies of this form must be submitted to the Student Business Office (with student’s reply card attached)

Each entry below must be coded with one of the following:

1= CLEP General (Assessment Center)
2= CLEP Subject (Assessment Center)
3= CEEB (Assessment Center)
4= OLLU Discipline Examination (Assessment Center)
5= Military Evaluation (Military Coordination)
6= Certified Career Credit Evaluation (Assessment Center)
7= Life/Work Experience (Director of Experiential Learning)

Course number must be indicated if content is equivalent to Our Lady of the Lake course.

<table>
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<th>Discipline</th>
<th>Course #</th>
<th>Course Title</th>
<th>Semester Hrs.</th>
<th>Code</th>
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<th>$100</th>
<th>Other</th>
<th>None</th>
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I have reviewed this student’s record and verify that the credit listed above does not duplicate credit which the student has already earned.

Print Name __________________________________________ Signature __________________________________________ Date ________________________________

For Student Business Office Use

Date Received __________________________ Date Payment Made __________________________ Date Forwarded to Registrar’s Office __________________________

For Registrar Office Use

Date Received __________________________ Date Recorded __________________________ Date Student and Advisor Notified __________________________