

Credit for Prior Learning Assessment Petition

Reference: AP 4235

- To qualify for Credit for Prior Learning, a student must register at Barstow Community College, **OR** complete a Student Educational Plan (SEP).
- The student may not be currently enrolled in, or have completed with a "C" or better, the course to be considered or challenged.
- The course is listed in a current college catalog and offered within the academic year.
- Credit for Prior Learning may not be available for all course offerings and is contingent upon discipline curricular decisions as approved by the appropriate discipline faculty.
- For students seeking Associates degrees, per Title 5 § 55063, students must complete a minimum of 12 semester units in residence at the Barstow College.
- If you are seeking Credit by Exam, please visit the college website to access the Credit by Exam form.

Please Note: CPL issued by Barstow Community College is not currently recognized by the UC system.
Please speak with a counselor to determine if CPL review process is beneficial to your specific academic goals.

Program Pathway:	Certificate	Transfer Degree	Local Degree	Program of Study:	
Student Information					
Student ID:	Last Name:	First Name:		Phone Number:	
BCC Email:			Personal Email:		
CPL Assessment Method					
<input type="checkbox"/> Joint Service Transcripts			<input type="checkbox"/> Industry recognized credential documentation		
<input type="checkbox"/> Noncredit or Professional development learning			<input type="checkbox"/> Faculty Assessment		
<input type="checkbox"/> Examination administered by other approved agencies			<input type="checkbox"/> Student-created portfolio		
<input type="checkbox"/> Work-based learning			<input type="checkbox"/> Other:		
Please Note: Students will need to submit a separate request for each discipline.					
BCC Course I believe should receive CPL	Evaluations or Counselor Course Recommendation for CPL:	Faculty Course Recommendation (if approving a different course than listed)	Faculty Decision	Grade (Approved Only) The student will receive a "P". If it is a letter grade, please indicate student grade for CPL	Student Selection Only complete if you do not accept all CPL Credit
			<input type="checkbox"/> Approved <input type="checkbox"/> Denied	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Appeal
			<input type="checkbox"/> Approved <input type="checkbox"/> Denied	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Appeal
			<input type="checkbox"/> Approved <input type="checkbox"/> Denied	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Appeal
			<input type="checkbox"/> Approved <input type="checkbox"/> Denied	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Appeal
			<input type="checkbox"/> Approved <input type="checkbox"/> Denied	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Appeal
Total Number of Recommended Units:			Total Number of Units Accepted by Student:		
Faculty Comments:					
Faculty Signature:					

I authorize BCC to evaluate and award the approved units above that I am requesting to receive. I understand my academic record will be notated if approved by Faculty.

Student Signature

Please return completed form to:
admissions@barstow.edu

Office Use Only:

Evaluator:	Date:	Notified by: <input type="checkbox"/> Email <input type="checkbox"/> Phone
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