Application for Credit Equivalency Course Credit for Life Experience &



Certifications

Please submit to the Office of the Registrar in 128 Ferrell Hall or via email Registration@wvstateu.edu

PART 1 Student Information

	Student Data
Name	ID – A#
Email	Phone
Catalog Yr.	Minor
Major	Graduation Term

Student Acknowledgment

I understand and agree the course credits as awarded below will incur credit charges applied to my account.

Student Signature:

PART 2 Evaluation Information

			Credit Evaluation Totals			
I re	I recommend the totals credit equivalencies as outline below					
	Lower Division (100-299)	Upper Division (300-499)	Graduate Level (500 +)			
	Total Credits Awarded (including	any additional sheets attached)				

	Part 2- B. Course Credit Equivalence						lencies
Subj	#	Title	Cr	Subj	#	Title	Cr
			Hr				Hr
		_] _]				<u></u>	
		_][

*Attach provided second page if additional fields are needed

PART 3 Authorization

	Academic A	uthorization		
I have reviewed the supporting documentation and agree with the credit equivalency evaluation reported above.				
Evaluator:	Date			
Dean of Subject:	Date			
Provost:	Date			

C	ashier A	uthorization
The appropriate charges for the above credits have been applied to the student's account. If the student is unable to pay, a hold will be applied to withhold all grades, transcripts and diplomas until all	oalances d	ıre paid.
Signature:	Date	

Additional Course Credit Equivalency Evaluation Sheet

	Part 2- B. Course Credit Equivalencie						encies
Subj	#	Title	Cr Hr	Subj	#	Title	Cr Hr
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