



# CREDIT FOR PRIOR LEARNING PETITION REQUEST

## CREDIT BY INDUSTRY RECOGNIZED TRAINING

Credit for Prior Learning (CPL) is college credit awarded for validated college-level skills and knowledge gained outside of a college classroom. By filling out this form you have verified that the course you are petitioning for is eligible for Credit by Industry Recognized Training. If the course is not approved your petition cannot be completed at this time. If you do not see your course on any of the lists of courses approved for Credit by Industry Recognized Training for CPL, please do not proceed with this form.

Credit by Industry Recognized Training (IRT) allows a student to receive college credit for prior learning by demonstrating knowledge, qualifications and/or competence in a specific skillset. Examples of industry recognized training are certifications, credentials, and licenses most often from programs within a related field to which they are pursuing.

**Please note that this form is intended for students petitioning for credit by industry recognized training.** Students wanting to petition for prior learning credit by way of examination, portfolio, or submission of their military joint service transcripts must do so by filling out the appropriate form. These specific forms can be found on the Las Positas College Credit for Prior Learning webpage, [laspositascollege.edu/cpl/index.php](https://laspositascollege.edu/cpl/index.php).

### STEP 1: Student Information

DIRECTIONS: Students please complete Step 1 by filling out the information, attaching **your industry certification documents** and your **DegreeWorks Worksheet**, and submitting to the LPC Evaluator at [lpc-priorlearning@laspositascollege.edu](mailto:lpc-priorlearning@laspositascollege.edu)

Student's Name (Last, First)

Today's Date

Student's W#

Student's Zonemail Email Address

Phone Number

Major

### Industry Training Certifications

#### Certification(s):

Awarding Organization:

Date(s) received:

#### Certification(s):

Awarding Organization:

Date(s) received:

#### Certification(s):

Awarding Organization:

Date(s) received:

#### Certification(s):

Awarding Organization:

Date(s) received:

#### Certification(s):

Awarding Organization:

Date(s) received:

#### Certification(s):

Awarding Organization:

Date(s) received:

I hereby petition to earn credit with the above-listed credentials in accordance with the rules governing Credit for Prior Learning as set forth in the College Catalog by submitting this form and the accompanying documentation. I understand all steps must be completed in order.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STEP 2: Course and Student Eligibility** (Completed by LPC evaluator) LPC evaluator verifies:

1. The course being petitioned for credit is eligible for Credit by Industry Recognized Training; and
2. The student is eligible by using the student's DegreeWorks Worksheet and/or other documentation because:
  - The student is in good standing in the District and has a Student Education Plan (SEP) on file,
  - The student has previously earned credit or noncredit from the District or is currently registered in the District,
  - The course is listed in the current College Catalog, and
  - The student is not currently enrolled in the course to be challenged.

LPC evaluator name: \_\_\_\_\_

LPC evaluator signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STEP 3: Industry Credential Review (Completed by Discipline Faculty)**

Pass/No Pass Only

Course(s) the student is eligible to receive credit for:

Course	Course Title	Units
Course	Course Title	Units
Course	Course Title	Units
Course	Course Title	Units
Course	Course Title	Units

Discipline Faculty name: \_\_\_\_\_

Discipline Faculty signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STEP 4: Administrator Approval** (Completed by the Program Division Dean)

Division Dean name: \_\_\_\_\_

Division Dean signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STEP 5: Administrator Approval** (Completed by the Vice President of Academic Services)

Vice President of Academic Services name: \_\_\_\_\_

Vice President of Academic Services signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STEP 6: CPL Course Creation** (Completed by the [Curriculum & Scheduling Specialist](#))

CRN CRN CRN CRN CRN CRN

Curriculum & Scheduling Specialist name: \_\_\_\_\_

Curriculum & Scheduling Specialist signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STEP 7: Degree Works Verification and Transcription** (Completed by Admissions & Records Representative)

Date Recorded on Student's Record:

Admissions & Records Representative name: \_\_\_\_\_

Admissions & Records Representative signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student notified by Evaluator Staff name: \_\_\_\_\_ Date: \_\_\_\_\_