

# REQUEST FOR PRIOR LEARNING ASSESSMENT FORM



This form must be filled out for each course a Student wishes to submit for Prior Learning Assessment.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Ascent College Course for PLA: \_\_\_\_\_

Select which method the student intends to use:

Professional Training Documentation

Experiential Essays

----- **Section below to be filled out by Registrar** -----

The course selected is required in the Student's degree plan.

Course Objectives:

\_\_\_\_\_  
Registrar's Signature

\_\_\_\_\_  
Date