APPLICATION FOR PRIOR LEARNING CREDIT

(Physical Education Credit)

STUDENT NAME	MAJOR
ADDRESS	MINOR
	STUDENT ID A#
LOCAL TEL. NO	CAMPUS MAILBOX
REQUESTING ONE OR TWO CREDIT	ΓS? (Please indicate how many PHED credits you are requesting.)
LOCATION OF EXPERIENCE:	
DATE OF EXPERIENCE: FROM	TO
Attach a narrative description a	and documentation to support this request.
physical aspects were involved, document the number of hours the location's letterhead. Activity example: Fitness Center	splain your fitness goal, how you went about achieving that goal, what the length of the activity, and when you achieved your goal. Include and spent at the activity's location. Documentation should be in a message on er, Yoga, or ask about a physical activity you have completed (40 hrs = 2)
crs; 20 hrs = 1 cr) First Aid and	
	Date
·	form to the Center for Student Success and Engagement/Advising.
PLEASE DO NOT WRITE BELOW TH	IIS LINE. <u>CREDIT RECOMMENDATION</u>
This application and its supporting documents	ments have been reviewed.
Faculty Evaluator	Date
Department Chairperson	Date
CSSE / Advising	Date
Dean of Academic Affairs	Date
Student Accounts (billing)	Date
DESCRIPTION CREDITS ———————————————————————————————————	MCLA COURSE EQUIVALENT CREDIT AWARDED APPROVAL OUT THE STATE OF THE
Office of the Registrar & Student Record	V ds Date
Students seeking prior learning credit for phy learning credit for a varsity sport are exempt	rsical fitness activities are charged a \$25 administrative fee. Students seeking prior from all fees.
Office Use Only: Administrative Fee:	; Credit Fee:

Distribution: Copies to - CSSE/Advising; Academic Affairs; Registrar/Student Records; Student Accounts; Student