

1500 Edwards Avenue PO Box 5587 Bismarck, ND 58506-5587 701.224.5400

## **Prior Learning Application: Request for Credit by Industry Training**

Bismarck State College (BSC) permits students to demonstrate college level competency and establish college credits through successfully completing approved industry training. BSC Operational Procedure 460.4.2

Please allow 7-10 business days for this application to be reviewed and to receive a notification of a decision and your next steps.

If you have any questions or concerns, and to submit your completed application, please contact the Distance Education and Learning Support Services Office at <a href="mailto:bsc.priorlearning@bismarckstate.edu">bsc.priorlearning@bismarckstate.edu</a>.

### **Eligibility**

### **Eligibility I**

Are you enrolled in a BSC course during the term for which credits are being requested? Y/N If you answered no, please contact your advisor for assistance. You must be enrolled in a course during the term for which you are requesting Prior Learning credits.

#### Eligibility II

Are you currently enrolled in the course you are requesting credit for prior learning?	Yes		No	
Were you ever enrolled in the course and earned a grade A-F or S/U?	Yes		No	
Has BSC awarded you transfer credit for the course?	Yes		No	
Have you previously earned Prior Learning credit for the course (military training, credit			No	
by exam, challenge examination, portfolio development, industry training,				
Straighterline and courses covered under high school articulation)?				

If you answered yes to any of these questions, please contact your advisor prior to submitting the form because you may not be eligible to be awarded Prior Learning credit.

#### **Student Information**

Student ID	
Student Name	
BSC Email Address	
Telephone	
What program have you	
been accepted into?	





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What is your a gradua	inticipated ition year?		
Course(s) Info	ormation		
	· · ·	sh to have evaluated for Credit by industr talog.bismarckstate.edu/catalog/course-o	,
Ex. ENGL	110	College Composition I	3
Course Prefix	Course Number	Course Title	Credit Hours
license earned; verification lette File Attachment	ocumentation of incounting coutline of training corrections	dustry training for evaluation. Examples in completed with course descriptions; assess appletion of training. Provide as much det	ssment of training outcomes;
Description		File Name	
			_
Acknowledgeme	ent		
		tion is to the best of my knowledge and I	belief, true and correct and
•	ects my status at tl	ne present time.	
Student Signat	ure and Date		
<u> </u>			
			DONE RIGHT.



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# Signatures

Dean of Distance Education and LSS	I be under a could be be a block to be uncertainted to be able to be a block of the could be a block o	
Dean of Distance Education and LSS	I hereby certify that this information is to the best of my knowledge	
	and belief, complete, correct, and attached.	
Signature and Date		
Assistant Dean of	I hereby certify that a Credit by Challenge Examination has been agreed	
	to by the department faculty.	
Signature and Date		
Dean of Distance Education and LSS	I hereby certify that this information is to the best of my knowledge	
	and belief, complete, correct, and attached.	
Signature and Date		
Student Finance	I hereby certify that the fees for Credit by Challenge Examination have	
	been paid.	
Signature and Date		
Academic Records	I hereby certify that these credits have been recorded to the students'	
Academie Records	BSC transcripts.	
Signature and Date		
Dean of Distance Education and LSS	I hereby certify that this information is to the best of my knowledge	
	and belief, complete, correct, and the student has been informed.	
Signature and Date		

