



EXPERIENTIAL LEARNING CREDIT EVALUATION REQUEST

STUDENT NAME

SEMESTER YEAR

TABLE OF CONTENTS

COURSE CODE, TITLE & DESCRIPTION 00

SUPPORTING EVIDENCE 00

RESUME / CV 00

LETTER OF SUPPORT 00

INSERT COURSE CODE, TITLE AND DESCRIPTION HERE.

Professional Experience / Evidence

INSERT YOUR EXPERIENCE AND EVIDENCE HERE. INCLUDE RESUME / CV AND LETTER OF SUPPORT.