CREDIT FOR LIFE EXPERIENCE APPLICATION

Purpose: To award for learning gained prior to enrollment at La Roche University.

Policy: Under Credit for Life Experience, learning must be related directly to a course offered by La Roche University and appearing in the catalog with the exception of courses listed as Internship, Independent Study, or Direct Research. The total number of credits awarded for life experience shall not exceed 30 credits and shall not be included in the last 30 credits required for residency at La Roche. Each division may limit further the maximum number of credits to be counted towards a major. Experience which could merit credit includes extensive experience in one’s work which would relate to a major at La Roche or experience in a given area not related to a major. Exception to this policy may occur only with the permission of the Vice President of Academic Affairs.

STEP I: REGISTRAR
ID# ___________ Name: __________________________________________ is applying for Credit for Life Experience the ___________________________ 20__ Semester. I verify this student is in good standing and eligible for this process according to the policy listed above.

______________________________________________________________ ______________
Registrar’s Signature Date

STEP II: STUDENT AND ADVISOR

<table>
<thead>
<tr>
<th>Cat. No.</th>
<th>Course Title</th>
<th>Credits</th>
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Student’s Signature Date

Advisor’s Signature Date

STEP III: FINANCE OFFICE

The application fee of $ ______ has been received for Credit for Life Experience.

______________________________________________________________ ______________
Finance Office Signature Date

STEP IV: ADVISOR

The advisor will contact the appropriate department chair to establish an evaluation committee.

______________________________________________________________ ______________
Advisor’s Signature Date

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STEP V: DEPARTMENT CHAIRPERSON
The Committee to review the portfolio of ________________________________________ is:

1. __________________________________________________

2. __________________________________________________

3. __________________________________________________

___________________________________________________ is appointed to convene the committee to examine the portfolio and submit a final grade.

___________________________________________________

Department Chairperson’s Signature

____________________

Date

STEP VI: PORTFOLIO REVIEW COMMITTEE
The committee met on (date) ________________________________, examined the portfolio of the above name student, and recommends that the following action be taken:

_____ No credit awarded

_____ Credits be awarded for ________________________________________

Cat. No. Course Title

Signatures of all committee members:

___________________________________________________

____________________

___________________________________________________

____________________

Date:

___________________________________________________

____________________

___________________________________________________

____________________

____________________

STEP VII: REGISTRAR
Received in the Registrar’s Office on ____________________________.

(Date)

Recorded in the Registrar’s Office on ____________________________.

(Date)

Copies are forwarded to the Finance Office for billing the per credit fee to the students account.

___________________________________________________

Registrar’s Signature

____________________

Date

After credit is awarded, copies of the credit for life experience application need to be sent to:

___ Registrar’s Office

___ Finance Office

___ Department Chair (copy to be included in portfolio

___ Student file