



Pikes Peak Community College

5675 South Academy Boulevard, Colorado Springs, CO 80906-5498

CREDIT FOR PRIOR LEARNING STUDENT AGREEMENT

1. I am applying for an evaluation of my life work and work experience based on a credit recommendation from **Published Guides**, the American Council on Higher Education (ACE) Guide, the National Guide to Educational Credit for Training Programs, and/or the results of Standardized Tests, CLEP, DANTES, APP and Excelsior College Reports.
2. **I understand I must enroll in and complete six semester hours of credit with Pikes Peak Community College and achieve passing grades before the awarded credits for the evaluation will be posted to my academic record.**
3. I understand that if I do not attend classes for two semesters (excluding the summer semester), I must meet the program requirements published in the catalog at the time of re-enrollment. If it takes longer than five years to complete a program and the program requirements change, a waiver will be required to graduate under the old requirements.
4. I understand that credit will only be awarded for those courses directly applicable to curriculum requirements at the college required of my declared certificate or degree program as outlined in the college's publications.
5. I am pursuing a degree in _____
6. **Signature:** _____ **Date:** _____

Please complete the following:

Student I.D. / Social Security Number: _____

Name: _____
Last First Mi

Local Address: _____

City: _____ State: _____ Zip: _____

Residence Phone #: _____ Business Phone #: _____

E-mail address: _____

All active duty military personnel must complete the following:

Years of active duty service: _____ Pay grade: _____

Army –PMOS _____ Air Force-PAFSC _____ Navy-NEC _____ Marine Corps-MOS _____

Military Unit: _____

Installation: _____ State _____ Zip Code _____