

## CREDIT FOR PRIOR LEARNING

### REQUEST TO APPLY APPROVED CPL EQUIVALENCY CREDIT

This form is to be used by students who have evidence of completing an EXISTING, UNIVERSITY-APPROVED CPL experience (see list at [www.millersville.edu/gsal/cpl](http://www.millersville.edu/gsal/cpl)) to request that the associated credit(s) be added to their transcript.

**STUDENT:** Fill out the following fields and forward to your advisor along with documentation showing that you successfully completed one of Millersville's recognized CPL experiences.

STUDENT NAME: \_\_\_\_\_ STUDENT ID#: \_\_\_\_\_

EMAIL: \_\_\_\_\_ ADVISOR NAME: \_\_\_\_\_

PROGRAM: \_\_\_\_\_

Training or credential presented: \_\_\_\_\_

Date of completion: \_\_\_\_\_ Today's date: \_\_\_\_\_

**ADVISOR:** If you agree that the above named student is eligible for CPL and you are in support of this request, fill in your name/signature and date below and forward to Office of Graduate Studies and Adult Learning (email [AdultLearning@millersville.edu](mailto:AdultLearning@millersville.edu)), along with the documentation / score report.

Advisor Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

**GSAL:** Confirm that requested CPL credential or training equivalencies are approved and on file, and then forward to registrar Transfer Coordinator.

Confirmed by \_\_\_\_\_ Date \_\_\_\_\_

#### REGISTRAR:

Date Entered in Banner: \_\_\_\_\_

Additional Info: \_\_\_\_\_