

Prior Learning Assessment Portfolio Cover Form

Idaho State University

This form should be submitted to the PLA Coordinator. The PLA Portfolio should be submitted as a single PDF document. **PLA Portfolio deadlines are listed on the PLA website.**

Student Name _____ Email _____

Address _____

Phone _____ Bengal ID Number _____

Catalog Year _____ Graduation Date _____ Level Freshman Sophomore Junior Senior

Major _____ College _____

Total Credit(s) Petitioning _____

STATEMENT OF AUTHENTICITY

By signing this form:

- I agree to comply with ISU's PLA policies and procedures.
- I authorize review of the Petition by university faculty and staff.
- I verify the truth, accuracy, and originality of Petition information.
- I understand it is my responsibility to collect all necessary signatures to submit this Petition.

Student Signature _____ Date _____

CREDITS REQUESTED

Department _____

Course Title _____ Course Number _____ Number of Credits _____

Instructor Name _____

Date _____

Instructor Signature _____

Approved Denied

If denied, please attach a letter of explanation.

Department Chair Name _____

Date _____

Department Chair Signature _____

Approved Denied

If denied, please attach a letter of explanation.

Dean Name _____

Date _____

Dean Signature _____

Approved Denied

If denied, please attach a letter of explanation.

Course Title _____ Course Number _____ Number of Credits _____

Instructor Name _____

Date _____

Approved Denied

Instructor Signature _____

If denied, please attach a letter of explanation.

Department Chair Name _____

Date _____

Approved Denied

Department Chair Signature _____

If denied, please attach a letter of explanation.

Dean Name _____

Date _____

Approved Denied

Dean Signature _____

If denied, please attach a letter of explanation.

Course Title _____ Course Number _____ Number of Credits _____

Instructor Name _____

Date _____

Approved Denied

Instructor Signature _____

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Department Chair Name _____

Date _____

Approved Denied

Department Chair Signature _____

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Dean Name _____

Date _____

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If denied, please attach a letter of explanation.

Course Title _____ Course Number _____ Number of Credits _____

Instructor Name _____

Date _____

Approved Denied

Instructor Signature _____

If denied, please attach a letter of explanation.

Department Chair Name _____

Date _____

Approved Denied

Department Chair Signature _____

If denied, please attach a letter of explanation.

Dean Name _____

Date _____

Approved Denied

Dean Signature _____

If denied, please attach a letter of explanation.

If additional courses are being requested, a second copy of this cover sheet may be used.

PLA Coordinator _____

Date _____

Academic Affairs _____

Date _____

Return all documents to the PLA Coordinator in the Student Opportunity Development Office in the Career Center (Museum Building 418).