PLAR SHIPPING & HANDLING FEE PAYMENT FORM

Thompson Rivers University
OPEN LEARNING

2009-10

TRU-OL PLAR Department, Box 3010, Kamloops, BC V2C 5N3
Fax 250 852 6405 www.tru.ca/distance

GENERAL INFORMATION

- This form is to be completed and submitted by candidates submitting a paper-based PLAR (prior learning assessment and recognition) portfolio for credit towards a TRU – OL program. Submit the completed form to the PLAR Department and the **non-refundable** fee.
- Submission of a PLAR portfolio does not guarantee admission to a program or awarding of credit.
- All items submitted for assessment are reviewed in strictest confidentiality and are not returned to the applicant.
- Direct questions to the PLAR Department, email: PLAR_OL@tru.ca or phone: 1 800 663 9711 ext 6820 (toll-free in Canada) or 250 852 6820 (Kamloops and international)

ENTER TRU-OL STUDENT NUMBER
|___|___|___|___|___|___|___|___|___|

PERSONAL DATA (PRINT CLEARLY)
SURNAME (legal)

_____
FIRST NAME (legal) FULL MIDDLE NAME(S) (legal)

_____
PREVIOUS SURNAME (if applicable)

_____
MAILING ADDRESS

_____
MAILING ADDRESS – SECOND LINE (if necessary)

_____
CITY/TOWN/VILLAGE

_____
PROVINCE/STATE POSTAL CODE/ZIP CODE COUNTRY

_____ _____ _____
HOME TELEPHONE NUMBER BUSINESS TELEPHONE NUMBER

|_____|_____|_____| |_____|_____|_____| LOCAL_____

FAX NUMBER
|_____|_____|_____|

EMAIL ADDRESS (print clearly)
_____

PLAR PORTFOLIO SUBMISSION
SHIPPING & HANDLING FEE (NON-REFUNDABLE)

❑ **$50**

PAYMENT FORM:

❑ **CHEQUE $_____** ❑ **MONEY ORDER $_____**

❑ **SPONSORED (Attach sponsor's letter of authorization) $_____**

❑ **AMERICAN EXPRESS $ _____**

❑ **MASTERCARD $_____** **VISA $_____**

CARD NUMBER

|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

EXPIRY DATE: MONTH _____ YEAR _____

NAME ON CARD (print clearly)

_____
CARDHOLDER'S SIGNATURE

TRU-OL CASHIER USE – FEE CODE