Application for PLAR (Prior Learning Assessment & Recognition)

2009-10

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

Thompson Rivers University
OPEN LEARNING

GENERAL INFORMATION

- This form is to be completed and submitted by candidates seeking PLAR (prior learning assessment and recognition) credit towards a TRU – OL program. Submit the completed form to the PLAR Department and the **non-refundable** fee.
- Submission of a PLAR application 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.
- *If applying for admission and/or transfer credit for formal studies, complete and submit the Program Admission/Transfer Credit form prior to applying for PLAR.*
- 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)

I HAVE REGISTERED PREVIOUSLY AT TRU-OL YES ❑ NO ❑

I HAVE APPLIED PREVIOUSLY FOR TRANSFER CREDIT WITH TRU-OL YES ❑ NO ❑

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)
_____

Transferring PLAR credits

By checking this box, I acknowledge that it is the responsibility of applicants planning to transfer TRU-OL PLAR credits to another institution to check with the receiving institution to ensure that PLAR credits are acceptable.

ASSESSMENT FEE (NON-REFUNDABLE)

- ❑ **GENERAL COMPETENCY PORTFOLIIO - $750.00**
- ❑ **COURSE-BASED PORTFOLIIO - $520 initial fee**
- ❑ **COURSE-BASED PORTFOLIIO- $36/ credit awarded**
- ❑ **CHALLENGE EXAM - $300 per course. Specify name of course_____**
- ❑ **OTHER FEE – Specify amount _____**

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

❑ **PAFB (Business/Management)**

Every student accepted for registration with Thompson Rivers University, Open Learning will be deemed to have agreed to be bound by the regulations and policies of the university and of the program, if applicable, in which that student is enrolled, including cancellation, withdrawal, fee penalties, possible refunds, student conduct, and grading.

I hereby certify that the information I have submitted on this form is true and correct. Completion of this signed form permits Thompson Rivers University, Open Learning to request and/or confirm any information necessary to support my application. Falsification of any document(s) of information submitted will result in the immediate cancellation of admission or registration at Thompson Rivers University, Open Learning, and this information will be shared with other educational institutions. In signing this form I understand that the information collected on this form is collected under the authority of the *Thompson Rivers University Act (BC)*. The information provided will be used for the sole purposes of admission, consistent with the mandate of the Thompson Rivers University, and may be shared with those educational institutions that offer programs in association with or in collaboration with the Thompson Rivers University, Open Learning.

APPLICANT'S SIGNATURE _____

DATE _____