



REGISTRAR'S OFFICE

1537 University Boulevard, Morrilton, AR 72110 | (501) 977-2052 | 1-800-264-1094 | Fax: (501) 354-7566 | www.uaccm.edu

# PRIOR LEARNING CREDIT REQUEST

Please print or type all of the following information

The student listed below has requested Prior Learning Credit (PLC) to be awarded. Please evaluate the attached documentation to determine possible major-specific credit(s) that can be granted.

Name: \_\_\_\_\_ Student ID No.: \_\_\_\_\_  
(Last Name) (First Name)

Current Declared Major: \_\_\_\_\_

Type of Prior Learning Credit

Articulated Credit Portfolio Evaluation Professional Certification Military Training

Other: \_\_\_\_\_

UACCM Course ID	UACCM Course Title	Credit Hours

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Based on the documentation submitted, the student is not eligible for Prior Learning Credit.

Reason for Denial of Prior Learning Credits: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Dean)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Vice Chancellor for Academic Affairs)

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Date Credit Posted: \_\_\_\_\_