

## Prior Learning Assessment and Recognition (PLAR) Self-Assessment Form

### Prior Learning Assessment and Recognition Self-Assessment Form Process

1. Review the course learning outcomes (CLOs) for the course you are requesting to receive prior learning credits towards, listed below under the Course Learning Outcomes column.
2. In the Evidence of Learning column provide details regarding your experiences to support your evidence of learning for each CLO. Such details may include the company, organization, or institution you gained these experiences from and how these directly relate to the course learning outcomes. If experiences are not from a company, organization, or institution, please provide details of how you obtained these learning experiences and how they directly relate to the CLO.

**Questions to ask yourself:**

- How do I currently use this knowledge/skill?
  - What previous training have I had to gain this knowledge/skill – workshops, work experience, courses, etc?
  - What personal development or volunteer experience do I have in this area?
3. If you believe that your learning experiences directly relate to the CLO, please submit this completed form to the Transfer Credit and PLAR Office at theservicehub@senecapolytechnic.ca. The Transfer Credit and PLAR Office will then connect you with a PLAR representative from your program area for next steps.

Student Name \_\_\_\_\_

Student ID # (if applicable) \_\_\_\_\_

Seneca Email Address \_\_\_\_\_

Alternate Email Address \_\_\_\_\_

Program: \_\_\_\_\_

Term: \_\_\_\_\_

Course Code: \_\_\_\_\_

Course Title: \_\_\_\_\_

COURSE LEARNING OUTCOMES		EVIDENCE OF LEARNING
1		
2		
3		
4		
5		

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	COURSE LEARNING OUTCOMES	EVIDENCE OF LEARNING
6		
7		
8		
9		
10		

### FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

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Candidate Signature \_\_\_\_\_

Date \_\_\_\_\_

### FOR ACADEMIC AREA OFFICE USE ONLY:

Evaluator Name (*please print*) \_\_\_\_\_

Evaluator Signature \_\_\_\_\_

Date \_\_\_\_\_

ELIGIBLE TO CONTINUE WITH ASSESSMENT: Yes: ☐ Term: \_\_\_\_\_ No: ☐ASSESSMENT: ☐ Challenge Process☐ Portfolio

Expected Completion Date: \_\_\_\_\_

### FOR TRANSFER CREDIT AND PLAR OFFICE USE ONLY:

PLAR Class Number Created: \_\_\_\_\_

Enrolled: ☐ Fee Posted: ☐ Term: \_\_\_\_\_

PLAR Systems Officer \_\_\_\_\_

Date \_\_\_\_\_