



Central Ohio Technical College
The Gateway – Student Records
 1179 University Drive, Newark, OH 43055
 Phone: 740-364-9594 ■ Fax: 740-366-9160
 cotcrecords@mail.cotc.edu

Credit for Prior Learning and Work Experience

Submit this form & all supporting documentation¹, with receipt if applicable, to The Gateway for review.

_____	_____	_____	_____
Last Name	First Name	Middle Name	Student ID
_____			<input type="checkbox"/> Landline <input type="checkbox"/> Mobile
Program of Study	Catalog Year	Phone Number	

I am requesting credit equivalency for training certification(s).

I understand the steps of this process to be:

- This form and copies of certifications will be forwarded to the appropriate academic and records staff for evaluation
- I will be notified of the credit evaluation outcome via my COTC student email.
- There is **no fee** required for the certification evaluation for course equivalency.
- Copy of my training certification(s) is attached. There are _____ total certificates to be reviewed.
- I am requesting credit equivalency for the following COTC course(s):

I am requesting credit equivalency for work experience relevant to my plan of study.

I understand this process to be:

- I will provide an academic official² copies of supporting documentation (samples of work, etc.) and a current copy of my resume to assist in making a preliminary determination of potential credit equivalency.
- I will contact Fees and Deposits (Hopewell Hall) to pay the **\$75 per course** fee. Fees can be paid on the extended campuses by visiting The Gateway.
- I will take the receipt and original form to The Gateway to be forwarded to Academic Affairs.
- My work experience evaluation for credit will be assigned to a faculty member who may contact me for additional follow-up and supporting documentation.
- After receipt of all necessary documentation and after the evaluation is complete, I will be notified of the work experience evaluation outcome via my COTC student email.
- I am requesting credit equivalency for the following COTC course(s):

The **\$75 per course evaluation fee** has been paid (official receipt attached) **This fee does not apply to military credit review.**

_____	_____
Student Signature	Date

¹ Do not submit original documents (make copies) or binders. Materials submitted become a part of the student record & will not be returned.
² An academic official is defined as a Dean, Director or Faculty.

** Gateway staff should make a copy of this form for the student to reference for the next steps in their process. **

Evaluation Process:

Types of supporting documentation received: _____

Date *all necessary* supporting documentation was received: _____

Course equivalencies recommended: _____

Faculty Signature: _____ Date of completed review: _____

(Signature necessary for work experience evaluation only)

Course equivalencies recommended: _____

Dean/Director Signature: _____ Date of completed review: _____

Awarding Credit:

Course Equivalencies awarded: _____

Provost Signature: _____ Date: _____

Gateway Use Only: CRI Code RGCREDIT added with status of "Not Reviewed"

Processed by: _____ Date: _____

Student Notified: Yes No