



EXEMPTION, ARTICULATED, OR PLA CREDIT

**Please return to Registrar's Office*

Student's Name: _____

Student ID#: _____ Major: _____

Exemption Credit Articulated Credit Prior Learning Assessment (PLA)

Course Name: _____ Course Number: _____ Credit Hours: _____

Course Name: _____ Course Number: _____ Credit Hours: _____

Course Name: _____ Course Number: _____ Credit Hours: _____

RESULTS

Course Name: _____ Test Grade: _____ OR PLA Credit

Course Name: _____ Test Grade: _____ OR PLA Credit

Course Name: _____ Test Grade: _____ OR PLA Credit



Examiner's Signature

Date

Paid \$ _____

***If a student meets criteria for articulated credit, there is no exemption fee.**

***Please refer to the SRTC Student Handbook for Exemption, Articulated, or PLA Credit guidelines.**

Registrar's Signature

Date