

EXPERIENTIAL LEARNING and COURSE CHALLENGE APPROVAL FORM

Course challenge may be used to request college credit for a Buffalo State course when the course objectives and student learning outcomes have been previously met. A student must meet with the department offering the credit for review. This form will be advanced to the Registrar's Office once the academic faculty and chair offering the course approves.

Credit for college-level experiential learning is available through INS 300. A student must meet with the INS Director for review. This form will be advanced to the Registrar's Office once the INS faculty and director approves Parts B and C.

INSTRUCTIONS:

1. Student completes Part A

A TO BE COMPLETED BY STUDENT:

- 2. Academic faculty/advisor or chairperson of dept that offers the course checks eligibility in part B and signs.
- 3. Chairperson of dept that offers the course completes Part C and signs and forwards to the Registrar's Office.

Na	me (print):	Banner ID:
Ма	ijor(s):	_Minor(s):
Ce	II Phone #:	BSC Email:
B. TO BE COMPLETED BY INS DIRECTOR or ACADEMIC		
FACULTY/ADVISOR OR CHAIRPERSON OF DEPT THAT OFFERS		
THE COURSE		
The following rules apply. Please check if student:		
	is matriculated.	
	has not already earned credit in the requested course.	
	has not already earned a grade in the requested course.	
	is not currently enrolled in the requested course.	
	has not already received 30 un credits through course challend	dergraduate credits or 6 graduate

Name (print)

Signature

C. TO BE COMPLETED BY INS DIRECTOR or CHAIRPERSON OF DEPT THAT OFFERS THE COURSE

The department determines the challenge method, which may include but is not limited to examination, portfolio, performance, or presentation.

Student is eligible to receive the following credit if the student passes the related assessment:

Prefix and Course Number (ex. HIS 107): _____ Credits: ____ Is this course repeatable: ____ Yes. Number of times ____ No

Credit should be applied with: ____ Course Challenge INS 300

The _____ Department approves the credit noted above be awarded to the student above based on successful assessment completion for the course.

Name (print) _____

Signature _____ Date

Credit earned will be recorded as credit only (CR) rather than

□ Processed Date _____ Initials _□ Not Processed: Notify Department Date _____

as a grade.

Registrar Use Only