



# Credit for Prior Learning

Return to: Registrar's Office  
Bldg. 3 Rm. 309  
assistant.registrar@cei.edu

Student may submit this petition requesting to be granted CEI course credit from prior learning experience.

**Student Information**

Date \_\_\_\_\_ Student ID \_\_\_\_\_  
Name \_\_\_\_\_ Phone \_\_\_\_\_  
Preferred Email \_\_\_\_\_

**Petition Information**

CPL Experience \_\_\_\_\_ CPL Hours Completed \_\_\_\_\_  
Desired CEI Course Equivalency \_\_\_\_\_

Student must **supply documentation and a written statement** that represents adequate work/certification/volunteer experience that fulfills their desired course requirement. If documentation and statement is not provided, the request will not be reviewed.

*By checking this box & submitting this form, I consent to providing my typed electronic signature in place of a handwritten signature.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Office Use Only****Program Manager**

Petition is:  Approved  Denied

Comment \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Department Chair**

Petition is:  Approved  Denied

Comment \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Dean of CTE/GEN ED/HHS**

Petition is:  Approved  Denied

Comment \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Registrar**

Petition is:  Approved  Denied

Comment \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_