

Prior Learning Assessment and Recognition (PLAR) Planning and Reporting Form

Name of Candidate: _____	Course Name and Title: _____
College of the Rockies Student Number: _____	Name of Faculty Assessor: _____
Candidate Contact (phone or email): _____	

PART 1 – PLANNING

(to be completed by Faculty Assessor and agreed to by Candidate)

Candidate is eligible to PLAR for:

- Yes, for the following course(s): _____
- No, for the following reason(s): _____

Evidence of learning will be demonstrated by:

Evidence of learning will be submitted by and/or activities will be completed by: _____
Date

Signature of Candidate

Date Signed

Signature of Faculty Assessor

Date Signed

PART 2 – REPORTING
(to be completed by Faculty Assessor)

I have evaluated this Candidate's evidence of prior learning as follows:

Course: _____ . Grade assigned: _____

Course: _____ . Grade assigned: _____

Assessor's Comments:

Signature of Faculty Assessor

Date Signed

Copy to: Faculty Assessor Candidate Office of the Registrar