

**PRIOR LEARNING ASSESSMENT AND RECOGNITION FOR MATURE STUDENTS**

**APPLICATION FOR ASSESSMENT FOR GRADES 9, 10 11 AND 12 CREDITS THROUGH THE EQUIVALENCY PROCESS**

***Please complete this application form and submit it to your school Principal at principal@oeshighschool.com***

Surname:

Given names:

MIN/OEN (if applicable):       Grade:

Gender: [ ]  Male [ ]  Female Date of birth:       year       month       day

School:

I wish to have my education and/or training credentials and related documentation assessed through the PLAR equivalency process. I believe that my credentials and related documentation provide evidence of my prior learning and demonstrate that I have met the curriculum expectations for each of the following courses in the Ontario curriculum:

I am aware that my credentials and documentation will be evaluated against the expectations outlined in the appropriate curriculum policy document(s). I am also aware that a maximum of 10 credits may be granted through the challenge and equivalency processes (combined) for courses in Grade 11 and 12.

I am submitting the following credentials and documentation for assessment through the equivalency process:

[ ]  transcript(s) from postsecondary education institution(s) (e.g., colleges, universities, or other similar institutions)

[ ]  transcript(s) from secondary schools/boards

[ ]  credential(s) from education and/or training programs (e.g., apprenticeship certificate)

[ ]  documentation from employer(s) (past or current), giving details of knowledge and skills required to perform work-related tasks

[ ]  documentation from supervisor in a volunteer work setting, giving details of knowledge and skills required to perform assigned tasks

[ ]  I have reviewed the curriculum expectations for each course for which I am requesting equivalent credit value.

[ ]  I understand that a board/school committee will review my application

Signature of student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Signature of principal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

**FOR OFFICE USE ONLY**

Date application received:

Date equivalency process completed: