

## Student Application for Prior Learning Assessment **Credit for Previous Foreign Language Experience**

Name:			
Address:			
Telephone:Home:	Work:	Cell:_	
Email:			
Oakton ID:			
I am applying for previous foreign la	inguage experience credit for	the following course(s).	
Oakton Course Prefix, Number and	Credit Hours		
Signature:			
To: Director of Registrar Service	For Office Use Or	nly	
E .			
From:(	Chair, Modern Languages		
The above-named student has comple	eted the following foreign lang	guage course(s) with a fin	
Course Prefix, Number and Title:			<u>Credit Hours:</u>
Proficiency credit is to be awarded f Course Prefix, Number and Title:	Credit Hours:		
Signature:		Date:	
Chair of Modern Signature:	Languages	Date:	
Dean of the Divisi	on		<del></del>

Signed copy to: Chair, Student