



Loyalist College

Prior Learning Assessment Portfolio /Challenge Evaluation Form

Program: _____

Student Name: _____

Student Number: _____ Faculty Assessor: _____

Course Name: _____

Course Code: _____ CRN: _____

Distance Studies/CE (if applicable)

Admissions Officer: _____

Has demonstrated competence in the required learning outcomes and should be awarded credit for the course named above with the following grade.

Has not demonstrated competence and should not be awarded credit for the course named above.

Basis of Evaluation/Comments: (i.e. Portfolio, skills demonstration, interview, exam):

Grade: _____

Faculty Assessor's Signature: _____

Date (dd/mm/yyyy): _____

Dean's Signature: _____

Please return to the Pathways Coordinator