

# RECOGNITION OF PREVIOUS LEARNING (RPL) WORK EXPERIENCE/EXPERIENTIAL LEARNING APPLICATION FORM



Office of the Registrar/Student Services  
Fax (403) 556-4711 [www.oldscollege.ca](http://www.oldscollege.ca)

## GENERAL INFORMATION

- Students must be admitted to Olds College prior to submitting an application
- Complete the Work Experience/Experiential Learning application form and submit it with a letter outlining the rationale for why you are requesting this review.
- You will be contacted by the Associate Registrar outlining further details. You may be required to provide specific information in a portfolio format. This information may include but is not limited to: a personal resume, performance test, letters of reference, photos/videos, work assessment report or performance appraisal, non-credit certificate(s) and/or an interview.
- The Associate Registrar will work with the appropriate Program Coordinator and arrange the review setup and interview if required.
- The Associate Registrar will notify the student of the result.
- Pay the appropriate fee to the Cashier upon successful application - processing fee of \$30/credit to a maximum of \$100 per course
- The evaluation process may take up to 4 weeks to complete.
- Requests for a review must be submitted by the following deadlines:
  - **August 1<sup>st</sup> for Fall Semester scheduled courses (September to December)**
  - **November 1<sup>st</sup> for Winter Semester scheduled courses (January to April)**
  - **April 1<sup>st</sup> for Summer Semester scheduled courses (May to August)**

## PERSONAL DATA (PLEASE PRINT CLEARLY)

Olds College Student Number

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Surname (legal)

First Name (legal)

Program and Major

Local Address



Phone #

Email Address

Please list the course(s) for which you are requesting a review and **attach your letter outlining the rationale for this request.**

Olds College Course \_\_\_\_\_

Course Description \_\_\_\_\_

\_\_\_\_\_

Credit Value \_\_\_\_\_

Olds College Course \_\_\_\_\_

Course Description \_\_\_\_\_

\_\_\_\_\_

Credit Value \_\_\_\_\_

Olds College Course \_\_\_\_\_

Course Description \_\_\_\_\_

\_\_\_\_\_

Credit Value \_\_\_\_\_

This information is collected under the authority of the Freedom of Information and Protection of Privacy Act. Public inquiries regarding the collection, use and disclosure of personal information provided on this form should be directed to the FOIP Coordinator of Olds College at 4500 – 50 Street, Olds, AB T4H 1R6.