



Recognition of Prior Learning (RPL) Request

Policy Reference: **AC.3.18.1** & **AC.3.18.3**

AA211, Heritage Hall
1301 - 16 Avenue NW
Calgary, AB T2M 0L4

Phone: 403.284.7248
Toll-free: 1.877.284.7248
Fax: 403.284.7112

Email: transfer.options@sait.ca

Web: sait.ca/admissions/transfer-options

Please review section D before completing sections A,B,C and E.

A) Personal Information

				Student ID Number	
Last Name		First Name		Middle Name	
Address		City		Province	
Preferred Number	Home Cellular Business	Alternate Number		Home Cellular Business	Postal Code
Email					

B) Program Information

Program you are interested in/SAIT program you are registered in	Have you previously received transfer credit within the SAIT program you are currently registered in? Yes No
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C) Recognition of Prior Learning Information

For office Use only

RPL - Transfer Credit						Current Banner Status		Decision		If Denied is PLAR Recommended		Entered on SHATRMS	Recorded on SHATATR
Institution Name	Course Code Previously Completed Note: Provide detailed course outline for each course listed	Grade Received Note: Provide your transcript	Year Completed	SAIT Course Code for Credit Assessment (ie: MATH-238)	Accepted	Denied	Accepted	Denied	Yes	No			
RPL - Prior Learning Assessment and Recognition (PLAR) - informal, non-formal and experiential learning													
Please refer to sait.ca/admissions/transfer-options for requirements.													

D) Payment Information

Canadian post-secondary credit - Free PLAR or International transfer credit - \$155 per course to a max of \$620
Fees for PLAR or International transfer credit will be added to your student account. Once the fee has been added, please make your payment through **mySAIT.ca** to avoid financial holds.
Review payment options (<https://www.sait.ca/admissions/tuition-and-financial-aid/tuition-and-fees/payment-options>) to find our acceptable online payment methods. **Do not include your credit card information in the email or fax you send to the Office of the Registrar.**

E) Acknowledgement

I have read the requirements of this form and agree to pay the non-refundable fee(s).

Student Signature _____ Date _____

FOIP Notification

The personal information you provide on this form is collected under the authority of the **Freedom of Information and Protection of Privacy Act** of the Province of Alberta, Section 33(c). This information will be used to process your prior learning assessment and recognition request. If you have any questions about the collection or use of this information, contact the FOIP Coordinator at foip.coordinator@sait.ca.