



PRIOR LEARNING ASSESSMENT (PLA) PROPOSAL FORM

Instructions: This form is used to propose changes to the [Prior Learning Assessment \(PLA\) Matrix](#). (See [Delgado Prior Learning Assessment](#).) Complete all fields applicable to your recommended change/addition to the Matrix. Email completed form with Initiator and Division Dean's signatures to rqvast@dcc.edu, Rosaria Guastella, Director, Department of Curriculum and Program Development.

Academic Division/ Department	Course Prefix & Number	Course Name	Brief Description of Proposed Change	CLEP Mark "Yes"	IBC <i>Indicate minimum version/year.</i>	AP Mark "Yes"	Credit Exam Mark "Yes"	LEAP Mark "Yes"	DSST Indicate Equivalent

Rationale Statement for Recommended Change(s):

Form Initiated By: Name/Title : _____ Signature: _____ Date: _____
 Division Dean: _____ Signature: _____ Date: _____

Office Use Only: Deans' Council _____ (date)
 Academic and Student Affairs Council _____ (date)
 Vice Chancellor for Academic & Student Affairs Approval: _____ (signature) _____ (date)
 Added to Matrix - Curriculum & Program Development Office _____ (date)
 Submitted to Policy Office for Publication: _____ (date)