

Graduate Level Prior Learning Credit Approval Form

MSU ID#: _____

Student Name: _____ Date: _____
Last First Middle/Maiden

E-mail Address: _____

Graduate program: _____

Is student currently enrolled: Yes _____ No _____ (Student MUST be currently ~~enrolled~~ at MSU to receive prior learning credit.)

Courses approved for graduate level prior learning credit:

(Maximum of _____ credit hours per degree can be awarded
3 ULRU / HDUQLQJ \$VVHVVP HQW DQG WUDQV
H[FHMZR WKLUGV RI WKH FUHGLWV KRXUV RI WKH GHJUHH)

Course Prefix & No.

Course Title

Semester Hours

TIME LIMIT FOR
