

Course Credit Verification Form



OWENS
COMMUNITY COLLEGE

(Please attach relevant certification for credit. Student will receive a grade of "CR")

Student Name _____ OCID _____
(First) (Last)

1. Course Name _____ Course # _____ Credit Hours _____

Type of Certification _____

2. Course Name _____ Course # _____ Credit Hours _____

Type of Certification _____

3. Course Name _____ Course # _____ Credit Hours _____

Type of Certification _____

4. Course Name _____ Course # _____ Credit Hours _____

Type of Certification _____

Is credit awarded through an articulation agreement? Yes No

Articulation Agreement: _____

Chair Approval _____ Date _____

Please email completed form with required documentation to PLA@owens.edu.

Course credit will not be awarded without a copy of the certification listed.

There is a \$50 processing fee for this form. The fee will be waived for any credit awarded based on an articulation agreement or veteran status. By signing this form, the student acknowledges they will be charged the \$50 processing fee after credit transcription.

Student Signature _____ Date _____

For PLA/Records Use Only

Is the student a veteran? Yes No