

Mission: To inspire lifelong learning and leadership through experience, excellence and

innovation.

Vision: Transforming the future through innovative learning.

Values: We value learner success, integrity, respect, community, excellence and innovation.



BAppB:ES TRANSFER CREDIT

Credit may not be granted for work completed more than 7 years prior to the date of this request. Transfer credit will be awarded only where credit has been earned.

- The applicant must have been accepted into the program and paid the tuition deposit before this application will be reviewed.
- The applicant must complete and submit this form to the Course Development and Applied Degree Coordinator no later than 2 months prior to the start of the course. Fax to 780 853 3008 Attn: Course Development and Applied Degree Coordinator or email to mariette.sargeant@lakelandcollege.ca

Last Name:	First Name:								Middle Name:					
Mailing Address:														
Home Telephone Number:	Ce				Email Address:									
Lakeland College Program:	Campus: Online					Student ID#:								
Transfer Credit is awarded for formal lead Be prepared to submit course outlines a								script.						
I am requesting transfer	credit for c	ourse w	ork co	mple	ted a	t:						(name o	of Institution)	
										APPROVAL				
CREDIT REQUEST LIST OI Lakeland College course number and name Issuing institution						ASIS OI e num		ıd name	Year	Yes	No	Coordinator Initials	Approval Da	
understand that grades in courses used	d for transfe	r credit	will no	t be	used	in calc	ulatir	ng weigh	ited avera	ges.				
Signature of Applicant					Date									
Administration Fee: \$375.00 per appro Applications that are denied will be char administrative time required to review t	rged a minir		\$100.0					edit(s) = I up to t		 of \$37	'5.00, d	depending on t	he	
CREDIT CARD PAYMENT INFORMATI	ON 🗆	Visa E	∃ Mas	terC	ard									
Name of Card Holder:										Amount Paid:				
Phone Number of Card Holder:					CSV #					Receipt #:				
Signature of Card Holder:						Expiry: MM YY					Date Paid:			
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Refer to Procedure: ACA 38.0-7 (STU 5.61)

Lakeland College complies with the *Freedom of Information and Protection of Privacy Act* of Alberta. Information collected on this form is collected under the authority of Section 33(c) of the Act for the administration of the ETC program. This information is used in the normal course of College operations in accordance with this legislation. If you have any questions about the collection and use of this information, please contact the FOIP Coordinator (780-853-8524; FOIP@lakelandcollege.ca).