CABARRUS
COLLEGE
of
HEALTH SCIENCES

CREDIT FOR LIFE EXPERIENCE EVALUATOR RESPONSE FORM

Student's Name: _____ Student ID Number: _____

Course Number and Name: _____

Course Description (from Cabarrus College Catalog): _____

_____

Instructions: Please review the Credit for Life Experience Application instructions and this form in its entirety prior to beginning your evaluation. Your decision should be rendered within 10-14 business days upon receipt of the applicant's materials from the Registrar. Once your decision has been made, return this completed form, the application, all applicant materials, and any additional information you may have added to the Registrar.

General Organization and Presentation

Yes No

☐ ☐ 1. Were all documents included in the submission? (Application, Autobiographical Letter, Significant Learning Crosswalk, Supporting Documentation, Reflective Essay, Current Resume, and Two Letters of Verification)

☐ ☐ 2. Was information presented clearly and in an organized manner?

Comments (If "no" was marked above, an explanation should be provided. Additional pages may be attached.):

_____
_____
_____

Learning Assessment

Yes No

☐ ☐ 1. Was each student learning outcome/competency addressed in the crosswalk, documentation, and reflective essay?

☐ ☐ 2. Did the applicant adequately describe how each student learning outcome/competency was learned?

☐ ☐ 3. Did the applicant correctly utilize terminology in the Autobiographical Letter and Reflective Essay?

☐ ☐ 4. Did the applicant apply course concepts and theory to real world examples in the Reflective Essay?

☐ ☐ 5. Was there a balance between theory and application in the Reflective Essay that was appropriate to the course?

☐ ☐ 6. Did the applicant use college-level writing skills?

☐ ☐ 7. Did the applicant demonstrate a level of knowledge and application in the Reflective Essay equivalent to that which would have been attained by taking the course?

Comments (If "no" was marked above, an explanation should be provided. Additional pages may be attached.):

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_____

Supporting Documentation

Yes   No

☐   ☐   1. Did the applicant provide supporting documentation for each student learning outcome or competency?

☐   ☐   2. Was the supporting documentation sufficient to demonstrate learning of each student learning outcome/competency?

☐   ☐   3. Was supporting documentation credible?

☐   ☐   4. Was there sufficient validation of the learning from the two letters of verification?

Comments (If "no" was marked above, an explanation should be provided. Additional pages may be attached.):

_____

_____

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Decision

☐ Credit Awarded   ☐ Credit Denied

If credit is denied, please explain using your evaluation above to guide your discussion.

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Program Chair Name_____

Program Chair Signature_____