



Recognition of Prior Learning (RPL) Request

Policy Reference: [AC.3.18.2](#) & [AC.3.18.3](#)

AA211, Heritage Hall
1301 - 16 Avenue NW
Calgary, AB T2M 0L4

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Fax: 403.284.7112

Email: rpl@sait.ca
Web: sait.ca/rpl

Please review section D before completing sections A,B,C and E.

A) Personal Information

		Student ID Number		
Last Name		First Name		Middle Name
Address		City		Province
Preferred Number	Home Cellular Business	Alternate Number	Home Cellular Business	Postal Code
Email				

B) Program Information

Program you are interested in/SAIT program you are registered in	Have you previously received transfer credit within the SAIT program you are currently registered in? Yes No
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C) Recognition of Prior Learning Information

For office Use only

RPL - Transfer Credit					Current Banner Status		Decision		If Denied is PLAR Recommended		Entered on SHATRMS	Recorded on SHATR
Institution Name	Course Code Previously Completed Note: Provide detailed course outline for each course listed	Grade Received Note: Provide your transcript	Year Completed	SAIT Course Code for Credit Assessment (ie: MATH-238)	Accepted	Denied	Accepted	Denied	Yes	No		

RPL - Prior Learning Assessment and Recognition (PLAR) - informal, non-formal and experiential learning

Please refer to sait.ca/rpl for requirements.

D) Payment Information

Canadian post-secondary credit - Free	PLAR or International transfer credit - \$150 per course
It can take 10 to 15 business days to process requests received by email or fax, at which time the fee for PLAR or International transfer credit will be added to your mySAIT.ca account. Once the fee has been added to your account, you will have two business days to make your payment through mySAIT.ca. Failure to pay will result in the request being cancelled. Acceptable forms of payment are Visa, MC, Debit, Cheque, Money Order or Cash. Do not include your credit card information in the email or fax you send to the RPL department	

E) Acknowledgement

I have read the requirements of this form and agree to pay the non-refundable fee(s).

Student Signature _____ Date _____

FOIP Statement

The personal information you provide on this form is collected under the authority of the Freedom of Information and Protection of Privacy Act of the Province of Alberta, Section 33(c). This information will be used to process your prior learning assessment and recognition request. If you have any questions about the collection or use of this information, contact the Office of the Registrar's FOIP coordinator at 403.284.8069.