



Credit for Prior Learning

208.524.3000 ext. 4 phone – 208.525.7026 fax
1600 S 25th E – Idaho Falls, ID 83404 – www.cei.edu

Student shall submit this petition requesting to be granted CEI course credit from prior learning experience.

Student Information

Date _____

Student ID _____

Name _____

Phone _____

Preferred Email _____

Petition Information

CPL Experience _____ CPL Hours Completed _____

Desired CEI Course Equivalency _____

Student must supply documentation and a written statement that represents adequate work/certification/volunteer experience that fulfills their desired course requirement. If documentation and statement is not provided, the request will not be reviewed.

Signature _____

Date _____

Office Use Only

Program Manager

Petition is: Approved Denied

Comment _____

Signature _____

Date _____

Department Chair

Petition is: Approved Denied

Comment _____

Signature _____

Date _____

Dean of CTE/GEN ED/HHS

Petition is: Approved Denied

Comment _____

Signature _____

Date _____

Registrar

Petition is: Approved Denied

Comment _____

Signature _____

Date _____