



**NON-TRADITIONAL CREDIT  
OR  
CREDIT BY EXPERIENCE RECOMMENDATION**

Based upon personal interviews with the student named below, plus verification of information reported by the student, I recommend that credit for the course(s) reflected be awarded:

**STUDENT NAME:** \_\_\_\_\_ **EMPLID:** \_\_\_\_\_

COURSE NO.	COURSE PREFIX	COURSE NUMBER	TITLE	NO. OF CREDITS

**NOTE:** USE INDIVIDUAL FORMS FOR EACH COURSE, UNLESS RECOMMENDING CREDIT FOR COURSES IN SAME SEQUENCE/PROGRAM.

**Basis for Recommendation**

Letter of verification, including period and length of service and nature of responsibilities, from appropriate employer should be attached **if** recommendation is based upon job experiences. If prior education or training constitutes part, or all, of the basis for recommendation, appropriate transcripts or documentation should be attached.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The student understands that this is a recommendation only and that, if approved, **credit will not be awarded until he/she has successfully completed 12 or more SWCC semester credits (2.00 GPA, or better) applicable to a specific program of study.**

\_\_\_\_\_  
 Signature - Counselor or Student's Advisor \_\_\_\_\_  
 Date

\*Advisor please note: Before credit can be applied to student's record, please verify completion of 12 semester credit requirement.

.....  
**RECOMMENDATION – INSTRUCTOR WHO TEACHES THE COURSE:**

Approval:     APPROVED     DISAPPROVED

Reason if disapproved: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Signature - Instructor \_\_\_\_\_  
 Date

.....  
**DIVISION DEAN ACTION:**

Approval:     APPROVED     DISAPPROVED

Reason if disapproved: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Signature - Dean \_\_\_\_\_  
 Date