University of Northern Iowa.
Graduate Studies

Credit for Prior Learning (CPL) Graduate Evaluation Request

This type of credit is designed for a special project/portfolio assessment of prior learning. The experience(s) upon which the project/portfolio is based may have been completed at any previous time; however, the student must be registered for credit at this university during the semester credit for prior learning (CPL) is requested, and CPL will be recorded only after the student has satisfactorily completed 12 hours of credit at this institution or at least 1/3 of the graduate plan of studies.

If approved, this request will grant University of Northern Iowa credit to the student's record. This request cannot be used to seek an exception from academic requirements, credit by exam, or for evaluation of transfer credit and an Academic Student Request should be submitted instead. A project or portfolio may be submitted any time during the semester up to the last date to add a second half-semester course for credit.

A. Student Information

Name: _____ UNI ID Number: _____

Phone Number: (_____)_____ UNI Email Address: _____

Major(s): _____

Minor(s) and/or Program Certificate(s): _____

Are you currently enrolled at UNI*: ☐ Yes ☐ No

**Current enrollment at UNI is required for evaluation and awarding of Credit for Prior Learning (CPL)*

B. Student Agreement

By signing below, I agree that:

- ☐ By submitting this request, I will be assessed the Credit for Prior Learning/Open Credit Fee which is equal to two credits of undergraduate tuition for each submitted request;
- ☐ My request may be denied or may be approved for between 0 - 15 credit hours of university credit;
- ☐ My work must be judged to be at least B level quality;
- ☐ Credit will be granted only on a Credit/No Credit basis. No letter grades will be given;
- ☐ I have completed at least 12 credit hours satisfactorily at the University of Northern Iowa;
- ☐ No more than 15 hours of CPL can count towards graduation requirements;
- ☐ Approval for CPL is not a guarantee of credit counting towards degree, major, or certificate requirements;
- ☐ There is no guarantee of credit prior to or upon submittal of the project/portfolio; and
- ☐ It is my responsibility to provide all requested documentation to support my request.

Student Signature: _____ Date: _____

C. CPL Request Information

Type of work experience for Prior Learning (CPL) credit requested (check all that apply):

- ☐ Work-based or professional development learning or training
- ☐ Industry-recognized credential(s)
- ☐ Military Service
- ☐ Other, please explain _____

Information on what you are requesting and the justification for your request:

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D. Department Evaluation & Approval

The following has reviewed and evaluated the student's Credit for Prior Learning request and their supporting documentation.

Program Coordinator: _____ Department: _____

If the department had additional reviewers, please list them below:

Faculty #1: _____ Department: _____

Faculty #2: _____ Department: _____

The student's submitted project/portfolio has been reviewed by the faculty of the department and has been approved for credit for prior learning based on the attached documented proof of previous work experience, knowledge, and abilities. The submitted work was judged to meet the academic standards set by our department, the University of Northern Iowa, and was determined to be of at least B level quality and warrants granting of academic credit.

Subject (i.e. PSYCH): _____ **Course Level: 519C**

Amount of credit approved (15 credits maximum): _____

Department Account Number for Fee Collection: _____

Department Head Signature: _____ Date: _____

E. Substitution/Waiver Approvals *(not required)*

If the credit granted is in their program of study, the department is also granting approval for the CPL credit to count towards the following program requirement(s). This approval is in place of an Academic Student Request for program requirements.

Please clearly state the waiver or substitution granted below:

Department Head Signature: _____ Date: _____

Department must provide the signed, completed form as well as all provided portfolio/project documentation and any related communications that were utilized in determining the granting of Credit for Prior Learning to the Division of Graduate Studies to complete approval and processing.

Administrative Use *(not required)*

Office of Graduate Studies:

- ☐ Confirmation letter sent to student Processed by: _____ Date: _____

Office of the Registrar:

- ☐ **Enrollment requirements met***
  **Current enrollment at UNI is required and at least 12 credits of earned UNI credit*
- ☐ **Fee Added to U-Bill:** $_____ Date: _____
- ☐ **CPL Enrollment Added:** Course: _____ Credits: _____Term: _____
- ☐ If applicable, waiver or substitutions processed
- ☐ Full CPL request, supporting documentation, and notification letter added to OnBase.

Staff Signature: _____ Date: _____

Form updated 9/25/2025