

Alternative Credit Request

Enrollment Services

Taylor Building – Eagle Central

Phone: 208-732-6250 Email: enrollment@csi.edu

This form is intended to assist students in completing a program of study, not simply to accumulate or earn college credits. This form and payment must be completed in its entirety before students can receive alternative credit.

- Students must be currently enrolled in the term they are requesting Alternative Credit be granted.
- Payment must be paid in full prior to the completion of the request.

Student Name:		CSI ID #:	
I understand I am assessed a fee transcription of these courses. Current are subject to change).	•	e current per credit tuition for the ound online at csi.edu/tuition-fees/ (fees	
Student's Signature:		Date:	
		Month Day Year	
Ту	ype of Alternative Cre	edit	
Course:	Course Title:	Cr Hr(s):	
 Advanced Placement (C01) ACT Exam (C04) Challenge Exam (C06) CLEP Score (C02) 		 Vertical Credit (C08) Faculty Attestation gnature	
•		Date:	
	Office Use Only		
Amount Paid: Payme	ent Type:	Date of Payment:	
Processed by:		Date:	



Faculty Attestation Form (Credit for Prior Learning)

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Faculty members, as experts in their fields, can provide verification of a student's prior knowledge of content that corresponds to a credit-bearing course at the College of Southern Idaho. If a faculty member determines that a student already has the prior knowledge indicating the attainment of the course outcomes, they may attest to that information and the student may be given credit upon registering and paying for the course.

Decisions on attestation are determined by evaluation of content knowledge and student learning outcomes, but should also be strictly informed by other relevant college procedures including the CSI Credit for Prior Learning process (CSI Catalog) and the CSI Conflict of Interest Policy (HR Manual) among others. Faculty members are encouraged to be informed of these policies before offering credit through attestation.

Students should start the attestation process by talking to the appropriate department chair. If the department chair determines that there is a possibility for CPL, the department chair will send the student to a faculty member to determine content knowledge.

Course Name	<u> </u>
Provide a brief description of method of determination (student intervi-	iew, artifact evaluation, etc.):
I attest to the fact that demonstrated completion of the student learning outcomes for	
Department Chair Signature	date
Faculty Signature	date
Instructional Dean Signature	date
Registrar Signature	date