

OFFICE OF RECORDS & REGISTRATION
Volunteer State Community College
PORTFOLIO CREDIT ASSESSMENT
Status Report/Credit Recommendation

Student's Name: _____ Student ID#: V00

Credit Recommendation:

Course Number: _____

Course Title: _____

Credit Award: _____

Competencies Evaluated: _____

I have evaluated the applicant's supportive documentation and, based on that assessment, recommend the following:

_____ Disapproval of Credit Sought

Justification: _____

_____ Approval of Credit Sought

Signature of Faculty Member

Date

Interview Conducted and/or Recommendation

_____ Disapproval of Credit Sought

Justification: _____

_____ Approval of Credit Sought

Signature of Dean

Date

AUTHORIZATION TO AWARD CREDIT

_____ has met the requirements to receive portfolio credit for course(s) _____.

I am authorizing the granting of _____ **credit hours** to be entered on the applicant's transcript of record.

Signature of Vice President of Academic Affairs

Date

cc: Chair, Portfolio Credit Committee for distribution to applicant.