Benedictine University

PETITION FOR EXTERNAL CREDIT

Please submit the signed form to: creditevaluation@ben.edu. Students, please use your BenU e-mail for verification purposes.

PART I General Information

Name _____ _____ _____ _____
Last First Middle Initial (Birth Name/Other)

BU ID# _____ **Admit Term** _____ **Major** _____ **Advisor** _____

Student Academic Career: ☐ Undergraduate ☐ Graduate

Type of External Credit ☐ AP Exam ☐ IB Course/Exam ☐ CLEP Exam ☐ State Seal of Biliteracy

☐ Work/Life Experience (PLA for portfolio/external certificate program) ☐ Department Approved Course

☐ Project Lead the Way (PLTW)

PART II Credit Award

External Credit (type/exam)	Awarded course (subj/number/title)	Score (if applicable)	Credit Hours
		TOTAL HOURS	

PART III Approval

This form must be reviewed and signed (typed/written) by the Advisor and Department Chair or Transfer Credit Evaluation Representative.

Reviewed by: _____ _____
Advisor Date

Approved by: _____ _____
Department Chair /Transfer Credit Evaluation Representative Date

NOTE: Duplicate credit will not be awarded. A maximum of 30 credit hours earned through any one or combination of external credit programs may be applied with the approval of the University for undergraduate programs. If you are receiving language credit, please contact the Department of Languages & Literature before submitting this form.
Graduate programs are subject to any external credit restrictions of student's current graduate catalog.

You must be registered for classes at Benedictine University to have credit posted.

PART IV Acknowledgement of Fees

Do not submit payment with this form. Fees will be applied to your account by Student Accounts Receivable or Business & Finance Department.

This will be the only notification. Posting fees as of January 1, 2023, are as follows:

☐ $10 per credit hour for External Credit Programs (including AP, CLEP, IB, Department Approved Course, or PLTW)

☐ $150 per credit hour for Work/Life Experience (PLA for portfolio/external certificate program)

$ _____ Total posting fee for ___ semester hours of credit

I acknowledge the above charges _____ _____
Student Signature Date

PART V Posting of Credits *OFFICE USE ONLY:*

Credit Posted by: _____ _____
Registrar Staff or Representative Date

Fee Reviewed/Posted by: _____ _____
SAR Staff or Representative Date

Revised 03/2023 SB