

# Application for Equivalency Credit



The student will adhere to the following process to achieve credit for prior learning through equivalency:

1. The student meets with the school counselor.
2. The student provides for the counselor all of the necessary, written documentation to support his/her equivalency request. Documentation should include: course outline, learning outcomes, total course hours and proof of certification.
3. The student and counselor complete the application for equivalency form.
4. All written documentation is submitted to the Principal for final approval.
5. Transfer Standing (TS) will be granted unless a percentage mark is provided in the written documentation.
6. Partial credit may be granted where there is a significant match of learning outcomes for that part of the course for which equivalency is being sought.

The personal information on this form is collected by School District No. 75 (Mission) under the authority of the School Act. The information will be used for educational purposes. This information will be protected under the Freedom of Information and Protection of Privacy Act. Questions about the collection and use of this information should be directed to the Information and Privacy Coordinator, School District No. 75, 33046 4th Avenue, Mission, BC, V2V 1S5, 826-6286.

Please complete all relevant sections of this form. Incomplete applications may delay processing of your request.

Name: \_\_\_\_\_ Female  Male   
(Please print)

Date of Birth: \_\_\_\_\_ Personal Education Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Name of Parent or Legal Guardian (if applicable): \_\_\_\_\_

School last attended: \_\_\_\_\_

1. I wish to obtain equivalency for the following course:

Course Name and Number: \_\_\_\_\_

Provincially Examinable: Yes  No

Locally Developed: Yes  No

2. I am ready for equivalency because:

a) I have credentials from another education jurisdiction which are approved in the Ministry of Education Course Information Booklet or Secondary Education in Canada Transfer Guides. Yes  No

Name of Jurisdiction(s): \_\_\_\_\_

Title of Credential(s) (attached): \_\_\_\_\_

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b) Course for which British Columbia Credit(s) is/are given:

\_\_\_\_\_

\_\_\_\_\_

Percentages or Transfer Standing (if no percentage available): \_\_\_\_\_

Signature of Student: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Signature of School Counselor: \_\_\_\_\_

Signature of School Principal: \_\_\_\_\_

Date: \_\_\_\_\_

For Office Use Only:

The Secondary School has sufficient evidence to provide Equivalency Credit information:

Yes  No

Application for Equivalency Credit:

Approved  Not Approved

(\*\*Note: The student may wish to initiate a Challenge if Equivalency Credit is not approved.)