



Counseling/Advising and Career Services, D-102
 1961 Delta Road
 University Center, MI 48710
 Phone: 989-686-9330
 Fax: 989-667-2228

CREDIT-BY-PORTFOLIO APPLICATION

- ◆ Please print and complete the top section of this application.
- ◆ Include the non-refundable \$60.00 per credit hour attempted fee in order to have the portfolio reviewed by the academic division. (Delta College reserves the right to increase fees.)
- ◆ Return this application along with your supporting documentation.
- ◆ Use a separate application for each course.

STUDENT (Please Print)

Name _____

Address _____

City, State, Zip _____

Student # _____

Telephone # _____

Email Address _____

Signature _____

Date _____

Course Name _____

Course Number _____

Credit Hours X \$60.00 = \$ _____

Delta College Cashier: Please deposit into CBP Account.

 Receipt Number

 Amount Paid

 Date Paid

 Staff

Faculty/Division Chair Evaluation

This portfolio: qualifies for credit/meets the course requirements.

does not qualify for credit/does not meet the course requirements.

 Faculty Signature

 Employee ID Number

 Date

 Faculty Signature

 Employee ID Number

 Date

 Associate Dean Signature

 Date

REGISTRAR _____

FP _____

LOG _____