



APPLICATION PLAR

PRIOR LEARNING ASSESSMENT & RECOGNITION

**Lakehead
Public
Secondary
Schools**

Complete this application and submit it to your school principal by the second Friday of APRIL

Surname _____

Given Names _____

MIN/OEN _____ Grade _____

Gender Male Female Date of Birth _____
yy/mm/dd

Name of Parent/Guardian _____

School _____

I wish to challenge for credit for the following course:

Course Title	Type	Grade/Level	Code

I am aware that a passing or failing mark resulting from a challenge for credit for a Grade 11 or 12 course will be entered on my Ontario Student Transcript and that a passing or failing mark or a withdrawal resulting from a challenge for credit for any Grade 10, 11 or 12 course will be entered on my PLAR tracking record and maintained in my Ontario Student Record.

I am aware that the PLAR Challenge Process will include formal tests (balanced between written work and demonstration, as appropriate for the subject) worth 70% of the final mark, and other types of assessment worth 30% of the final mark. I am aware that my skills and knowledge will be evaluated against the expectations outlined in the appropriate Ontario curriculum policy document. I am aware that a maximum of four credits may be granted through the Challenge Process for courses in Grades 10-12, with no more than two in any one discipline.

I am submitting the following as evidence that I am qualified to challenge for credit in this course:

- letter(s) of recommendation from teacher(s) familiar with the course expectations
- letter(s) of recommendation from member(s) of the community
- a portfolio of relevant work
- proof of successful relevant experience in a supervised setting
- a videotape, audiotape, or CD-ROM with samples of relevant work
- proof of relevant prior learning from another educational jurisdiction
- proof of successful completion of courses identified as prerequisites for this course

APPLICATION

PLAR

PRIOR LEARNING ASSESSMENT & RECOGNITION

Complete this application and submit it to your school principal by the second Friday in APRIL

STUDENT PARAGRAPH

Write a paragraph of 100-200 words stating why you want to challenge for credit for this course. Be sure to include the following:

- ways in which the course credit will help you to fulfill your educational goals
- your special interests and skills related to this course

APPLICATION
PLAR
PRIOR LEARNING ASSESSMENT & RECOGNITION

Complete this application and submit it to your school principal by the second Friday in APRIL

STUDENT AUTHORIZATION

I have reviewed the curriculum expectations and the descriptions of the levels of achievement for this course with a designated subject teacher.

I understand that a Board/school committee will review my application.

Student Signature

Date

Parent/Guardian Signature

Date

Teacher-Adviser Signature
(or Guidance Counsellor)

Date

For OFFICE USE Only

Date Application Received _____

Date Student Informed _____

Date Challenge Process Completed _____



RECORD OF ASSESSMENT

PLAR

PRIOR LEARNING ASSESSMENT & RECOGNITION

**Lakehead
Public
Secondary
Schools**

Surname _____

Given Names _____

MIN/OEN _____ Grade _____

Gender Male Female Date of Birth _____
yy/mm/dd

Name of Parent/Guardian _____

Course Title _____ Course Type _____

Course Grade/Level _____ Course Code _____

Teacher _____

School _____

Assessment Strategies

A Formal Testing 70% of final percentage grade

Overall Expectations Covered	Type of Test	Date Completed	Level of Achievement

Percentage Grade (out of 70%) _____

RECORD OF ASSESSMENT

PLAR

PRIOR LEARNING ASSESSMENT & RECOGNITION

B Other Assessment Strategies – 30% of final percentage grade

Overall Expectations Covered	Type of Assessment Strategy	Date Completed	Level of Achievement

Percentage Grade (out of 30%) _____

FINAL PERCENTAGE GRADE _____

_____ Subject Teacher Signature	_____ Date
_____ Student Signature	_____ Date
_____ Principal Signature	_____ Date
_____ Teacher/Adviser/Guidance Counsellor	_____ Date
_____ Parent/Guardian Signature	_____ Date



PLAR

PRIOR LEARNING ASSESSMENT & RECOGNITION

INTERIM TRACKING RECORD

(To be sent to student's home school)

M F 19__/__/__

**Lakehead
Public
Secondary
Schools**

Student Surname First Name(s) MIN/OEN Student # Gender Date of Birth

Lakehead District School Board

School Board/School Authority/Inspected Private School* Number Name of School Date of Entry

Date yy/mm	School Board/Inspected Private School**	Course Grade/Level	Course Title	Code	Discipline	% Grade	Credit	Compulsory	Withdrawal	Authorization***

* Name of school board/school authority/inspected private school that maintains the student's OSR
 ** Name of school board/school authority/inspected private school through which the student earned the credits
 *** Signature of person authorized to maintain the student's OSR
 Note For policy on the use of this form, see Policy/Program Memorandum No. 129, "Prior Learning Assessment and Recognition (PLAR): Implementation in Ontario Secondary Schools."



PLAR

PRIOR LEARNING ASSESSMENT & RECOGNITION

CUMULATIVE TRACKING RECORD

(For inclusion in OSR)

M F 19__/__/__

**Lakehead
Public
Secondary
Schools**

Student Surname First Name(s) MIN/OEN Student # Gender Date of Birth

Lakehead District School Board

School Board/School Authority/Inspected Private School* Number Name of School Date of Entry

Date yy/mm	School Board/Inspected Private School**	Course Grade/Level	Course Title	Code	Discipline	% Grade	Credit	Compulsory	Withdrawal	Authorization***

* Name of school board/school authority/inspected private school that maintains the student's OSR
 ** Name of school board/school authority/inspected private school through which the student earned the credits
 *** Signature of person authorized to maintain the student's OSR
 Note For policy on the use of this form, see Policy/Program Memorandum No. 129, "Prior Learning Assessment and Recognition (PLAR): Implementation in Ontario Secondary Schools."