

PRIOR LEARNING AND ASSESSMENT RECOGNITION





PLEASE COMPLETE AND RETURN THIS APPLICATION

STUDENT NAME:D		OB:	
٩DD	RESS:		
			DE:
PHONE:			
	I am currently enrolled i	n or have be	een enrolled in:
	Program		Length of time and Level or Credits earned / to be earned
	ESL – English as a Second Language / Length of time	& level	
	LBS - Literacy and Basic Skills / Length of time & leve		
	U-Turn Program		
	Adult Day School		
	Independent Study		
	Work for Credit		
	E-Learning		
	Night School		
_	Summer School		

Mature students who are working under OSS diploma requirements are eligible to apply for Grade 11 and 12 senior equivalent credits. In order to be granted senior equivalent credits under P.L.A.R., students must demonstrate that their prior learning relates directly to a majority of the expectations from the course being considered for equivalency.

It is important that students attempt to **provide** all of the information requested following in **as much detail as possible**. Where possible, attach **additional documentation** (letters, certificates, membership cards, etc.) Attaching a **current resume** is strongly recommended.

A) Evidence of Educational Learning – DOCUMENTS

Transcripts / Certificates / Diplomas

Type	Ontario	Other Province	Outside Canada	ICAS Verified
High School				
College/University				
G.E.D.				
Other				

B) EMPLOYMENT HISTORYPlease fill in the chart(s) below regarding any paid employment that you have had. Please attach a separate page(s) if you have had more than three previous employers. You must follow the same format when reporting these additional jobs.

	,
Name of Employer	Location
Job Title	Length of Employment – months, years & hours per week
Job Description	Skills and Knowledge required
Documentation attached Equivalent (Credit
Name of Employer	Location
Job Title	Length of Employment – months, years & hours per week
Job Description	Skills and Knowledge required
*	- 1
Documentation attached	Credit
Name of Employer	Location
Job Title	Length of Employment – months, years & hours per week
Job Description	Skills and Knowledge required
☐ Documentation attached Equivalent (Credit
·	
Name of Employer	Location
Job Title	Length of Employment – months, years & hours per week
Job Description	Skills and Knowledge required
- CON DOCUMENT	ciano and renormougo roquirou
Documentation attached Equivalent (Credit

C) FORMAL TRAINING

(Threshold, Personal Support Worker, conflict resolution, Smart Serve, WHMIS, resume/writing/job hunting, etc.). If you have mor	е
than two courses or educational experiences to report, please attach another sheet(s). You must follow the same format when	
reporting these additional courses or educational experiences.	

Name of Course or Program		Location		
Length of Involvement– weeks & hours per v	veek			
Course Description		Skills and Knowledge gained		
Name of Course or Program		Location		
Length of Involvement– weeks & hours per v	veek			
Course Description		Skills and Knowledge gained		
Documentation attached Equ	ivalent Credit			
•				
D) LANGUAGES - Are you fluent in a l	anguage other thar	n English (read, write and speak)		
Language		on – years & how did you learn it		
Documentation attached Equ	ivalent Credit			
	ivalent Great			
E) LEADERSHIP OPPORTUNITIES	•			
Some people have had leadership opportunities in	the workplace, throu	igh athletics, or in various clubs and organizations (coaching		
sports team, training employees, etc.) Describe in and knowledge did you acquire as a result of these		ther) leadership opportunities that you have had. What skills		
Leadership Opportunity	Length of In	volvement – months, years		
Description in detail	Skills and Kr	Skills and Knowledge learned		
Leadership Opportunity	Length of Inv	volvement – months, years		
Description in detail	Skills and Kr	nowledge learned		
☐ Documentation attached Equ	ivalent Credit			

F) ENTREPRENEURIAL ACTIVITIES

Describe the knowledge and skills that you have developed through any entrepreneurial activities with which you have been involved, and for which you have been paid (selling Avon, running your own business, babysitting, etc)

Name of Activity	Length of Involvement – years & hours per week
Description in detail	Skills and Knowledge learned
Name of Activity	Length of Involvement – years & hours per week
Description in detail	Skills and Knowledge learned
Documentation attached Equiva	alent Credit
work where you were attached to an agency or organ informal volunteer work, like helping out family or frier charging. Please note this does not include that	nteer work with which you have been involved. This can be formal volunteer ization like Big Brothers/Big Sisters, a retirement home or coaching. It can be nds by babysitting for free, or cutting the grass for an elderly neighbour without community service completed to fulfil a criminal sentencing requirement
Name of Organization or Person	Length of Involvement – weeks, months, years & hours per
Description in detail	Skills and Knowledge learned
Documentation attached Equiva	alent Credit
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Description in detail	Skills and Knowledge learned
Documentation attached Equiva	alent Credit
Name of Organization or Person	Length of Involvement – weeks, months, years & hours per
Description in detail	Skills and Knowledge learned
Documentation attached Equiva	alent Credit

H) PARTICIPATION IN CLUBS, TEAMS, PROFESSIONAL ORGANIZATIONS.

Describe any experience you have had as a member of a team or professional organization. Describe the knowledge and skills you developed as a result of your involvement with this group. Be sure to provide the name of the group and how long you have been or were a member.

Name of Club, Team, Professional	
Organization	Length of Involvement – years & hours per week
Description in detail	Skills and Knowledge learned
Name of Club, Team, Professional Organization	Length of Involvement – years & hours per week
Description in detail	Skills and Knowledge learned
☐ Documentation attached Equivalent	Credit
gym or recreation centre, played on a sports team, runner, jo	
Name of Activity	Length of Involvement – years & hours per week
Description in detail	Skills and Knowledge learned
Name of Activity	Length of Involvement – years & hours per week
Description in detail	Skills and Knowledge learned
Name of Activity	Length of Involvement – years & hours per week
Description in detail	Skills and Knowledge learned
Documentation attached Equivalent	Credit

Describe any hobbies that you have (computers, sewing, hiking, etc.). In particular, you should emphasize the skills and knowledge that you have developed as a result of your experience with this hobby.

Hobby	Length of Involvement – months, years
Description in detail	Skills and Knowledge learned
Equivalent Credit	
Hobby	Length of Involvement – months, years
Description in detail	Skills and Knowledge learned
Equivalent Credit	

K) PARENTING / CAREGIVING

Fill out the chart below if you are a parent or have cared for other children or a family member.

Name & Ages of Person/People cared for	Relationship to you	
Length of Involvement – weeks, months, years & hours	s per week	
Description of Care	Skills and Knowledge gained / required	
Name & Ages of Person/People cared for	Relationship to you	
Length of Involvement – weeks, months, years & hours per week		
Description of Care	Skills and Knowledge gained / required	

L) OTHER LIFE EXPERIENCES

Describe any other prior learning experience that you were unable to include in any of the categories above. For example, do you live independently? If so, for how long? Did you cook for yourself /family? Do you have a variety of interpersonal relationships? If so please describe. Do you drive, own your own car? Do you manage your own finances or family finances? Have you lived in more than one city/province /country or lived in an alternate housing arrangement? Describe the knowledge and skills that you have as a result of this experience

Name of Experience or Special Ability			
Length of Involvement – weeks, months, years & hours per week			
Description of Experience / Special Ability	Skills and Knowledge gained / required		
Documentation attached	Credit		
Name of Experience or Special Ability			
Length of Involvement – weeks, months, years & hours	s per week		
Description of Experience / Special Ability	Skills and Knowledge gained / required		
Documentation attached			
Name of Experience or Special Ability			
Length of Involvement – weeks, months, years & hours per week			
Description of Experience / Special Ability	Skills and Knowledge gained / required		
Documentation attached	Credit		
Name of Experience or Special Ability			
Length of Involvement – weeks, months, years & hours per week			
Description of Experience / Special Ability	Skills and Knowledge gained / required		
Documentation attached			

APPLICANT DECLARATION - PLEASE READ AND SIGN

✓	Please check that you have read each statement.
	I wish to have my education and /or training credentials and related documentation assessed through the P.L.A.R. equivalency process.
	I wish to have my credentials and related documentation considered for all possible senior equivalent
	I am aware that my credentials and documentation will be evaluated against the expectations outlined in the appropriate curriculum policy document(s).
	I am aware that a maximum of 10 credits may be granted through the equivalency process for courses in Grades 11 and 12.

I hereby give permission to the Hamilton Wentworth District School Board Assessment Centre to contact any of the persons and/or institutions, employers or organizations that I have identified as able to verify my experience. I understand that I may revoke this permission in writing at a later date.

(Please print clearly)
Student Signature:
Date:

Revised May 2015