## LONE STAR COLLEGE SYSTEM

## Application for Prior Learning Assessment by <u>High School Articulation</u>

College of Origination: (please check	· ·	_
LSC-Cy-Fair LSC-F	airbanks Center LSC-Kingwood	LSC-Montgomery LSC-Conroe Center
LSC-North Harris L	.SC-Greenspoint Center LSC-Carver	Center LSC-Tomball LSC-Willowchase Center
(Please Print)  (Last Name of Student)	(First)	(MI)
Colleague #:		Phone:
Street Address	City/State	ZIP
Student's Signature	E-mail A	ddress Application Date
High School:	Year Graduated:	School District
Eligibility requirements checklist: All must be checked accordingly.		
☐ Student has applied for articulated credit within 15 months of high school graduation (36 months if RNSG 1172 articulation, **must be admitted to nursing program**)		
At least one articulating course was taken as a junior or senior		
☐ Student attained grade of "80" or better in high school articulated course each semester (validate on official high school transcript)		
$\square$ Requested course is part of student's certificate or degree plan (may be an elective)		
All prerequisites for articulated college courses have been fulfilled		
Student is TSI complete. If not met, please explain		
☐ Requested articulated courses are listed in online resource for student's school district		
Student completed 6 semester credit hours of non-developmental coursework at LSCS within 1 year of application date (10 sch, if RNSG 1172 articulation, **must be admitted to nursing program**) If not, please hold application for completion of 6 credit hours		
Course Request:		
1. HS Course Abbrev.	PEIMS #	Title:
Grades - Year comp	es Year completed: Articulated College Course:	
		(Course Prefix) (Course Number)
2. HS Course Abbrev.	PEIMS #	Title:
Grades Year comple	eted: Articulated College (	Course:
		(Course Prefix) (Course Number)
		Title:
Grades Year comp	eted: Articulated College	Course:
Grades Year completed: Articulated College Course: (Course Prefix) (Course Number)  For more than 3 courses, please use additional forms.		
Legible Signature Admissions/Advising St	aff Phone Extension	Date
Signature of SO Student Information Se	rvices Office	Title Date

7-2008