

ADMISSION WITH CREDIT FOR PRIOR CERTIFICATED LEARNING
INDIVIDUAL APPLICANT: SPECIFIC CREDIT TRANSFER
(A) APPLICANT DETAILS & SUMMARY OF CREDIT TRANSFER
A.1 NAME OF STUDENT:

Student registration number:

A.2 The programme you are studying (or planning to study) at City College Norwich (The “Receiving Award”)
A.3 TOTAL CREDIT VALUE OF PROPOSED CLAIM

Total credit volume claimed: at level 4:

at level 5:

at level 6:

(B) THE QUALIFICATION YOU ARE PRESENTING FOR RECOGNITION:

Currency of prior certificated learning is normally limited to a period of 5 years. Where an applicant presents the award outside this normal currency period they will be required to offer evidence of relevant and appropriate updating, professional practice and/or development.

B.1 NAME OF AWARDING BODY:
B.2 TITLE OF AWARD:
B.3 DATE OF AWARD:
B.4 VOLUME & LEVEL OF GENERAL CREDIT (Total volume and level of credit in certificated learning presented):

at level 4:

at level 5:

at level 6:

B.5 CREDIT RATING AUTHORITY (if not a UK University, professional body or regulated awarding organisation):
(C) PROPOSED INDIVIDUAL ADMISSION WITH SPECIFIC CREDIT & CONTEXT
C.1 AWARD towards which specific credit is to be accredited:
C.2 Volume and level of credit for which credit transfer is sought:

Module in receiving award:

Credit volume:

Level:

(D) BACKGROUND TO PROPOSAL

D.1 Coverage of the Learning Outcomes in the receiving award has been demonstrated and can be evidenced in the following way/s:
(To be completed by the Applicant.)

D.2 List of subject specialists who have identified the Volume & Level of Credit in the proposal:
(To be completed by the School of Higher Education.)

(E) APPROVAL PROCESS

(This section to be completed by the School of Higher Education.)

E.1 INTEGRATION OF THE SPECIFIC CREDIT INTO STUDENT PROGRAMME WITHIN THE RECEIVING AWARD

The student will continue studies within the receiving award in the following way:

E.2 PROPOSING AND SUPPORTING SIGNATURES

The academic certification forming the basis of this proposal has been seen by relevant academic staff and a copy has been taken for inclusion in the student's academic file.

PROPOSER: (Course Leader or Module Tutor)

Name		Signature	
Title		Date	

SUPPORTED BY: (Academic Leader, Programme Manager, Deputy Head of School or Head of School)

This proposal has been checked for accuracy before submission to CCN Recognition Review Panel:

Name		Signature	
Title		Date	

(F) CCN Recognition Review Panel (CRRP) Recommendation

Proposal endorsed for presentation to the University of East Anglia (via the Partnerships Office).

The proposal cannot go forward to the University because:
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Signed for CRRP:

Name		Signature	
Name		Signature	
Name		Signature	
Name		Signature	
Date			

**(G) DECISION OF THE UNIVERSITY
(authorised Officer of the University):**

**Proposal
Approved**

**Proposal
Rejected**

Reason for rejection:

Name		Signature	
Authorised Officer please enter title			
Date			