



## Muskegon Community College

# Credit for Industry-Recognized Credentials Application Form

Muskegon Community College considers industry-recognized credentials, such as professional licensures and certifications, to represent a level of learning and competency for which college credit may be granted.

**How to Apply for Credit:** Submit this form and a copy of your current industry-recognized credential to the Registrar's Office, either by email to [OfficeoftheRegistrar@muskegoncc.edu](mailto:OfficeoftheRegistrar@muskegoncc.edu), by fax to (232) 777-0209, or in-person to the Student Welcome Center. *Submit one form per credential.*

**Review Process:** Applications and credentials are evaluated by the appropriate academic department at MCC, whose decision is final. After submitting this form and a copy of the credential to the Registrar's Office, the Registrar's Office will forward the documents to the appropriate academic department at MCC. After a faculty member in the academic department makes a decision, the Registrar's Office will notify the student through the student's MCC email account.

### Student Information

Date: \_\_\_\_\_ First and Last Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

MCC Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

### Credential Information

Name of Credential:	Date Credential Was Awarded:	Credential Expiration Date (if applicable):
_____	_____	_____

### Student Signature

By signing and submitting this application, I understand and agree to the following:

- Determination of credit is made by the appropriate academic department at MCC, whose decision is final.
- Submitting this application does not guarantee that it will be approved nor that any credit will be awarded.
- Students awarded credit for industry-recognized credentials must still meet MCC's degree residency requirement, which requires students to complete at least 30 total credits, or the last 15 credits, at MCC in order to earn a degree at MCC.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Academic Department Decision (To Be Completed by Faculty Evaluator)

Faculty Signature: \_\_\_\_\_ Decision:      Approved      Denied

If approved, course credit to be awarded:

Course Number:	Course Title:	# Credits to Award
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____