**Request for exemption from modules on the basis of Prior (Certified) Learning (AP(C)L)**

1. **Applicant:**

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| --- | --- |
| Name: |  |
| Address: |  |
| Email address: |  |
| Programme applied for: |  |

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| --- | --- | --- | --- | --- | --- |
| Exemption on the basis of the following study | | | | | |
| Institution | Module Code | Module Title | Year | Credits | Mark |
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I enclose original or authenticated copies of transcripts or other evidence of units/modules taken at another institution.

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| --- | --- | --- |
| Exeter modules from which exemption is requested | | |
| Exeter Module Code | Module Title | Credits |
|  |  |  |
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1. **Approvals:**

**Programme Director**

I recommend that the applicant named above be granted exemption from the year of study or modules, as indicated below, within the programme applied for on the grounds of the attached evidence of prior learning:

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| --- | --- | --- | --- |
| Year of study or Module Code | Module Title | Credits | Comments |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
| Signed: | Date: |

**Associate Pro-Vice-Chancellor Education for UG/PGT programmes, or the Associate Pro-Vice-Chancellor Research & Impact (or Faculty DGPR, or Department DGPR (or equivalent)) for Professional Doctorates:**

Delete as appropriate:Recommendation approved / recommendation rejected

|  |  |
| --- | --- |
| Signed: | Date: |

1. **Dean’s Exception:**

Delete as appropriate: Approved / Rejected / N/A not a Dean’s Exception

|  |  |
| --- | --- |
| Signed: | Date: |

|  |
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| Reasons for rejection (if appropriate): |

1. **For return to the Faculty APL Coordinator to inform the applicant of the decision**