# Sample PLAR for Mature Students Senior Equivalency Credit Assessment

| Student Name:  | Date of Birth:           |                              |  |
|--|--------------------------|------------------------------|--|
| Application Date:  | Campus:                  | Student Number:              |  |
|  |                          |                              |  |
|  |                          |                              |  |
| TO BE COMPLETED BY THE ASSESSOR  |                          |                              |  |
| Total Number of Senior Equivalent Cre  | edits Eligible:          |                              |  |
| Number of Senior EQV credits granted<br>*Up to 14 with evidence of Completed Canad |                          | up to a max of 10*           |  |
| With this application: ☐ No further senior equivalent cre attained.                | dits with be awarded. Th | e maximum has been           |  |
| ☐ A further equivalent c<br>documentataion of evidence be                          |                          | at a later date, should more |  |
|  |                          |                              |  |
| Principal/Designate signature (Assesso   | or):                     |                              |  |
| Date:  | _                        |                              |  |

(revised June 2024)

#### **Applicant Declaration**

| Course Title   | <u> </u>  | Course Type  | Course Grade/Level   | Course Code   |
|--|---|--|--|---|
|  |   | <i>''</i>  | ,  |   |
|  |   |  |  |   |
| transcript – does not  | have to be tra  | nslated, home school o   | ols/boards credential(s) from edu<br>course evidence) and/or training p  | orogram (eg certificate(s)).  |
| I have attach  | ed transcripts,   | credentials recognizing  | g Completed Canadian Post Se   | <u>condary</u>  |
| Required Evidence (p   | provide one or  | more of the following  | ):   |   |
|  |   | ndary education instituip Certification from Sk  | ution(s) (e.g., colleges, universitie<br>ills Trades Ontario   | s, other similar institutions   |
| If you wish to have y  | our credential  | s and related docume   | station considered for all conjer  |   |
| •  |   | s and related documen  | itation considered for all sellior   | courses, simply check the   |
| box that follows this  | table.  |  | and related documentation con  |   |
| I am aware that my cappropriate curriculu  | table.  I wish to senior aredentials and um policy docu   | to have my credentials equivalent courses.  documentation will be ment(s). I am also awar  |  | sidered for all possible  |
| I am aware that my cappropriate curriculu challenge and equival  | I wish to senior credentials and am policy documents processed turriculum exp   | to have my credentials equivalent courses.  documentation will be ment(s). I am also awares (combined) for coursectations for each cour  | and related documentation con<br>e evaluated against the expectation<br>re that a maximum of 10 credits r  | sidered for all possible ons outlined in the may be granted through the ivalent credit value or I have  |
| I am aware that my cappropriate curriculus challenge and equival I have reviewed the cappropriate that my crequested that my credit is the requested that my credit is the representation of the repre | I wish to senior  redentials and am policy documalency processes curriculum experdentials and sion to (School have identified                 | to have my credentials equivalent courses.  documentation will be ment(s). I am also awares (combined) for coursectations for each courrelated documentation  Board) to contact any of | and related documentation con<br>e evaluated against the expectation<br>re that a maximum of 10 credits rees in Grades 11 and 12.<br>ese for which I am requesting equ   | sidered for all possible ons outlined in the may be granted through the ivalent credit value or I have nior equivalent credits.   |
| I am aware that my cappropriate curriculus challenge and equival. I have reviewed the carequested that my cr. I hereby give permiss organizations that I have reduced that my cr.  | I wish to senior tredentials and am policy document allency processes the curriculum experiedentials and assign to (School have identified e. | documentation will be ment(s). I am also awards (combined) for coursectations for each cour related documentation  Board) to contact any cas able to verify my expense.                | and related documentation con<br>e evaluated against the expectation<br>re that a maximum of 10 credits reses in Grades 11 and 12.<br>These for which I am requesting equipped be considered for all possible secont | sidered for all possible  ons outlined in the may be granted through the  ivalent credit value or I have nior equivalent credits.  s, employers, or revoke this permission in |

#### Please complete this application form.

Mature students who are working under Ontario Secondary School Diploma requirements are eligible to apply for Grade 11 and 12 senior equivalent credits. To be granted senior equivalent credits under Mature PLAR, 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 below in as much detail as possible. In addition, third party documentation must be attached to this application.

| A) Languages   |   |
|--|---|
| Indicate the language(s) – besides English - that you speak and write fluently.  |   |
|  |   |
|  |   |
| Required Evidence/Third Party Documentation (provide one or more of the following):  |   |
| ☐ Provide a written sample of your writing in your language(s).  |   |
| ☐ Provide a digital recording of your oral language skills.  |   |
| Provide a third person letter (family, teacher, etc.) confirming your fluency.   |   |
| ☐ If you cannot provide any of the above, ask your staff for a task overall expectation  | template.                               |
| B) Hobbies/Traditional Activities, Crafts  |   |
| List your hobbies. Examples may include: woodworking, soap stone carving, crafting sewing, regalia making, photography, art, etc.) Emphasize the skills and knowledge to because of your experience with this hobby or activity. | · • • • • • • • • • • • • • • • • • • • |
| Hobby/Activity Description   | Estimated Hours                         |
|  |   |
|  |   |
|  |   |
| Required Evidence (provide one or more of the following):  |   |
| ☐ Provide photos/video of each of your hobbies.  |   |
| ☐ Write a detailed description of each of your hobbies and the skills you have develop   | had                                     |
|  |   |
| $\Box$ If you cannot provide any of the above, ask your staff for a task overall expectation   | tempiate.                               |

#### C) Leadership Opportunities

Provide details of leadership opportunities you have had in the workplace, through athletics, or in various community clubs and organizations. Emphasize the skills and knowledge that you have developed because of these opportunities. Examples may include Athletic Teams, Projects, Youth Recreation League, Political Leadership, men's group, women's group, organizer of community events etc

| Description of Leadership                  |   | Estimated Hours       |
|--|---|-----------------------|
|  |   |                       |
|  |   |                       |
|  |   |                       |
|  |   |                       |
|  |   |                       |
|  |   |                       |
| Required Evidence (provide one             | e or more of the following):  |                       |
| ☐ Provide a third person le                | etter (family, coach, teacher, etc.) confirming your leadership.  |                       |
| Provide evidence of lead                   | dership training or certification you have received.  |                       |
| ☐ If you cannot provide ar                 | y of the above, ask your staff for a task overall expectation te  | mplate.               |
| D) Volunteer Work                          |   |                       |
|  |   |                       |
| •  | nity service or volunteer work with which you have beer<br>Iumane Society, Powwow, hunting and fishing, communi | •                     |
|  |   |                       |
| Name of Organization                       | Description of Volunteer Duties   | Estimated Hours       |
|  |   |                       |
|  |   |                       |
|  |   |                       |
|  |   |                       |
|  |   |                       |
|  |   |                       |
| Required Evidence (provide one             | e or more of the following):  |                       |
| ☐ Provide photos, videos o                 | of you volunteering.  |                       |
| <u> </u>                                   | etter (family, coach, church leader, elder, teacher, etc.) confirm  | ning your leadership. |
| <ul> <li>Please note that commu</li> </ul> | nity service completed to fulfill a criminal sentencing requiren  | nent does not count   |

## E) Fitness Activities

| Provide a detailed description of any fitness activities with which you have been involved and for what period |
|--|
| of time. Examples include dancing, fancy shawl, volleyball, hockey, basketball, yoga, powwow etc               |

| Fitness Activity Description                          |   | Estimated Hours             |
|---|---|-----------------------------|
|   |   |                             |
|   |   |                             |
|   |   |                             |
|   |   |                             |
|   |   |                             |
|   |   |                             |
| Required Evidence (provide one                        | e or more of the following):  |                             |
| ☐ Provide photos, videos o                            | of your fitness activities.   |                             |
| Provide evidence of gym                               | •   |                             |
| ☐ Provide a third person le confirming your fitness a | etter (family, fitness partner, teacher, coach, fitness instruct activity.  | or, personal trainer, etc.) |
| F) Entrepreneurial Ac                                 | tivities  |                             |
| have been involved. For insta                         | skills that you developed through any entrepreneurial and the such entrepreneurial activities as as participation in Flea Markets, fundraising, selling A | selling Avon, crafting,     |
| Name of Business                                      | Description of Business   | Estimated Hours             |
|   |   |                             |
|   |   |                             |
|   |   |                             |
|   |   |                             |
|   |   |                             |
|   |   |                             |
| Required Evidence (provide one                        | e or more of the following):  |                             |
| ☐ Provide photos, videos o                            | of your business.   |                             |
| <u> </u>  | social media sites for your business.   |                             |
| ☐ Provide a third person le                           | etter (family, customer, etc.) confirming your business.  |                             |

### **G)** Employment History

Please answer the questions below regarding any paid or unpaid documented employment that you have had.

| 1. | Wor | k Exr | perien | ce |
|----|-----|-------|--------|----|
|    |     |       |        |    |

| Job Title                            | Employer                                  | Estimated Hours |
|--------------------------------------|---|-----------------|
|                                      |   |                 |
| Description of Duties and Responsib  | oilities:                                 |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |
| Required Evidence (provide one or mo | re of the following):                     |                 |
| ☐ Provide a record of employmen      | t T/I nav stuh                            |                 |
|                                      | oyer stating period of employment and I   | hours worked.   |
|                                      | mily, case manager, teacher, etc.) confir |                 |
|                                      |   |                 |
|                                      |   |                 |
| 2. Work Experience                   |   |                 |
| Job Title                            | Employer                                  | Estimated Hours |
|                                      |   |                 |
| Description of Duties and Responsib  | l<br>bilities:                            |                 |
| ·                                    |   |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |
|                                      |   |                 |

| Required Evidence (provide one of   | more of the following):  |                                  |            |  |
|---|--|----------------------------------|------------|--|
| ☐ Provide a record of employ  | ment. T4. pav stub   |                                  |            |  |
|   | Provide a record of employment, 14, pay stub  Provide a letter from your employer stating period of employment and hours worked. |                                  |            |  |
|   |  | ther, etc.) confirming your empl | oyment.    |  |
|   |  |                                  |            |  |
|   |  |                                  |            |  |
| 3. Work Experience  |  |                                  |            |  |
|   |  |                                  |            |  |
| Job Title   | Employer   | Estimated Ho                     | urs        |  |
|   |  |                                  |            |  |
| Description of Duties and Resp  | onsibilities:  |                                  |            |  |
|   |  |                                  |            |  |
|   |  |                                  |            |  |
|   |  |                                  |            |  |
|   |  |                                  |            |  |
|   |  |                                  |            |  |
|   |  |                                  |            |  |
|   |  |                                  |            |  |
|   |  |                                  |            |  |
| B   |  |                                  |            |  |
| Required Evidence (provide one or more of the following):   |  |                                  |            |  |
| ☐ Provide a record of employment, T4, pay stub  |  |                                  |            |  |
| Provide a letter from your employer stating period of employment and hours worked.                            |  |                                  |            |  |
| Provide a third person letter (family, case manager, teacher, etc.) confirming your employment.               |  |                                  |            |  |
|   |  |                                  |            |  |
|   |  |                                  |            |  |
| H) Formal Training  |  |                                  |            |  |
|   |  |                                  |            |  |
| 1. <b>Certifications</b> (ie. WHMIS, First Aid/CPR, Forklift Training, Working at Heights, Smart Serve, etc.) |  |                                  |            |  |
|   | Certification Title  |                                  | Date of    |  |
|   |  |                                  | Completion |  |
|   |  |                                  |            |  |
|   |  |                                  |            |  |

| Required Evidence (provide one or more of the   | following):                                       |                              |  |
|---|---|------------------------------|--|
| ☐ Provide copies of each certification.   |   |                              |  |
| ☐ Provide a letter from your employer sta   | ting completion of certification.                 |                              |  |
| <u> </u>  | tructor, employer, etc.) confirming completi      | on of certification.         |  |
|   |   |                              |  |
| 2. <b>Licenses</b> (ie. drivers – G, M, hunting, f  | ishing, boating, etc.)                            |                              |  |
| License   | Title   | Estimated Hours              |  |
|   |   | Earning License              |  |
|   |   |                              |  |
|   |   |                              |  |
|   |   |                              |  |
|   |   |                              |  |
|   |   |                              |  |
|   |   |                              |  |
| Required Evidence (provide one or more of the   | following):                                       |                              |  |
| (   |   |                              |  |
| ☐ Provide copies of each license.   |   |                              |  |
| ☐ Provide a letter from your employer sta   | ting completion of license.                       |                              |  |
| ☐ Provide a third person letter (family, ins  | tructor, employer, etc.) confirming completi      | on of license.               |  |
|   |   |                              |  |
|   |   |                              |  |
| 3. Additional Formal Education (ie  | secondary and nost secondary transcripts          | annronticochin               |  |
| 3. <b>Additional Formal Education</b> (ie. secondary and post-secondary transcripts, apprenticeship certifications, STEP LLEO, driver's ed, etc.)   |   |                              |  |
| certifications, 31Er EEE3, arriver 3 ca, etc  | ,   |                              |  |
| Title of Course or Transcript Type  | Organization/Institution Providing                | Estimated Hours              |  |
|   | Course/Transcript                                 |                              |  |
|   |   |                              |  |
|   |   |                              |  |
|   |   |                              |  |
|   |   |                              |  |
|   |   |                              |  |
| Required Evidence (provide one or more of the   | following):                                       |                              |  |
|   |   |                              |  |
|   | tion institution(s) (e.g., colleges, universities | , other similar institutions |  |
| ☐ Transcript(s) from secondary schools/bo   |   |                              |  |
| <u> </u>  | ining program (e.g., apprenticeship certificat    | :e)                          |  |
| Provide copies of each certificate of completion.   |   |                              |  |
| Provide a letter from your STEP teacher, trainer, education stating completion of course.  Provide a third person letter (family, case manager, employer, teacher, etc.) confirming completion of course. |   |                              |  |

# I) Vehicle Ownership Do you own your own vehicle? ☐ No ☐ Yes For how long? \_\_\_\_\_ Required Evidence (provide the following): ☐ Provide copy of vehicle ownership Description of vehicle maintenance (including ATV's, ski doos, engines, etc.) J) Parent/Step-Parent/Guardian Do you have children or have you helped raise children? □ No ☐ Yes Required Evidence (provide the following): ☐ Provide copy of birth certificates Provide a third person letter (family, family doctor, etc.) confirming you are a parent and/or have helped raise child(ren) Knowledge and Skills Acquired

# K) Mental Health/Physical Health Journey Have you had a mental health/physical health journey? □ No ☐ Yes ☐ Prefer Not to Answer Required Evidence (provide the following): Provide a third person letter (doctor, mental health worker, teacher, family, case manager, etc.) confirming your journey. The duration of the mental/physical health journey should be documented. Specifics of mental/physical health journey is not required. Knowledge and Skills Acquired L) Participation in Clubs Describe any experience you have had as a member of a club or clubs (for example: 4H, cadets, church group, youth group, etc.). Name of Club **Description of Club Participation Estimated Hours**

Required Evidence (provide one or more of the following):

Provide photos, videos of you in your club.

☐ Provide a third person letter (family, club organizer/leader, teacher, etc.) confirming your club participation.

| M) Indigenous   |   |                             |
|---|---|-----------------------------|
| Do you identify as Indigenous?  |   |                             |
| □ No<br>□ Yes<br>□ Pref   | er Not to Answer  |                             |
| Describe any participation in cultural acti drumming, etc.) in which you participate.   | vities and Community Experiences (ie. Cou   | ncils, Powwows,             |
| Cultural Activ  | rity Description  | Estimated Hours             |
|   |   |                             |
| Required Evidence (provide the following):  Provide photos/videos that capture you provide a third person letter (family, activities. | our participation in cultural activities. community leader, elder, etc.) confirming you | r participation in cultural |
| N) Participation in the Arts  |   |                             |
| Do you participate in the arts (ie. music, on etc.)? Describe your experience(s) in the   | drama, dance, etc.) or create art (ie. visual arts.                                     | art, photography, pottery   |
| Art Do  | escription  | Estimated Hours             |
|   |   |                             |
|   |   |                             |
|   |   |                             |
| Required Evidence (provide the following):  |   |                             |
| Provide photos/videos that capture y  | your participation in the arts.   | ition in the arts           |

## O) Living Independently

Do you live independently? Describe your living arrangements (ie. apartment, group home, house, etc.).

| Living arrangement   |                        | <b>Total Months</b>       |
|--|------------------------|---------------------------|
|  |                        |                           |
|  |                        |                           |
|  |                        |                           |
|  |                        |                           |
| Required Evidence (provide the following):   |                        |                           |
| ☐ Provide a rental/lease agreement or property tax.  |                        |                           |
| Provide a third person letter (family, support worker, counsellor, te  | acher, etc.) confirmir | ng living arrangements.   |
| Knowledge and Skills Acquired  |                        |                           |
|  |                        |                           |
|  |                        |                           |
|  |                        |                           |
|  |                        |                           |
|  |                        |                           |
| The control of the co |                        | at a series of the series |
| I have reviewed the curriculum expectations for each course for which I am requested that my credentials and related documentation be considered for   |                        |                           |
| Student Name:  |                        |                           |
| Student Signature:   |                        |                           |
| Date:  |                        |                           |