

**REFERENCE FORM (PLAR)
PRIOR LEARNING ASSESSMENT AND RECOGNITION CHALLENGE**

NAME OF CANDIDATE: _____

COURSE CHALLENGED: _____

NAME OF REFERENCE: _____

Reference Contact Information

Position/Title: _____

Address: _____
(Street) (City) (Postal code)

Phone: _____ Email: _____

How long and in what capacity have you known the candidate? _____

Capacity: Teacher Instructor Personal Reference Other

Has the candidate explained to you the nature of the PLAR challenge?

Yes No

Has the candidate reviewed with you the expectations of the Ministry course they intend to challenge?

Yes No

Do you feel you have a reasonable understanding of the knowledge and skills the candidate should possess in order to make a successful PLAR challenge?

Yes No

From your perspective, please rank the candidate in terms of the appropriateness of their prior learning (i.e., skills and knowledge) that would suggest they have a reasonable chance of success with their PLAR challenge?

Low Medium High

Please comment on the appropriateness and likelihood of success regarding the PLAR challenge by the candidate. Please use back if necessary.

Reference Signature

Date