



Apprenticeship Credit for Prior Learning

Apprenticeship Program (employer, state): _____

Occupation: _____

Apprentice Name: _____

Credit Requested by Apprentice or Sponsor: _____

Reason for Request: _____

On-The-Job-Learning (OJL) Documentation:

Employment in a similar or related occupation:

1. If the employee has worked within the healthcare system, consider the relevance of the job to the current apprenticeship. Credit may be granted for a job in the healthcare industry if the job has relevance to the apprenticeship as determined by the sponsor or their representative.

Approval granted by sponsor _____ **Amount of time credited** _____ **Date** _____

2. If the employee has worked in a job outside the healthcare industry or related to the mission of the healthcare industry (e.g. in a community-based organization that addresses population health, disparities of health, or a technology-based organization that requires skills needed for the particular apprenticeship, etc.) up to 6 months credit may be granted as determined by the sponsor or their representatives.

Approval granted by sponsor _____ **Amount of time credited** _____ **Date** _____

Other documentation for OJL

In the case of internships, or other related experience, credit may be given by assessing prior experience as it relates to the OJL work processes documented.

OJL Work Process	Approx. Dates Performed	Organization
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____



Related Technical Instruction (RTI) Documentation

For each of the required apprenticeship classes to be taken, if the apprentice has taken an equivalent class, receiving a C or better grade; the apprentice may be granted credit for the class. The apprentice will provide the information below to receive credit for prior education. The Sponsor may require transcripts.

	Name of Class	Grade received	Name of Educational Provider	Date
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____
10.	_____	_____	_____	_____

Apprentice Signature _____ Date: _____

Apprenticeship Sponsor Representative _____ Date: _____

Sponsor Decision on Request: