

Guidelines for preparation of a request for credit for prior academic accomplishments.

1. The purpose of preparing this document is to formally request that a didactic course successfully completed be considered in lieu of a required didactic course in the Non-Traditional Pharm.D. program.
2. This process is designed for students who have achieved an advanced level of competence in the content and objectives of the required course.
3. Included with this request should be a cover letter that clearly and thoroughly explains your request. This is your opportunity to point out any strengths or competencies you have that would not be evident from a transcript or grade report.
4. Pharmacotherapy courses and modules **are not eligible for credit** for prior academic accomplishment. The only exception to this is Board of Pharmaceutical Specialties (BPS) Pharmacotherapy certification. BPS certification can be used in place of the 12-hour pharmacotherapy series.
5. EVEN IF A REQUIRED COURSE IS CREDITED BASED ON PRIOR ACADEMIC ACCOMPOISHMENTS YOU WILL NEED TO ENROLL IN AND WILL BE ASSESSED TUITION FOR THAT NON-TRADITIONAL PHARM.D. COURSE.
6. In order to be considered your request should be for a course that:
 - was successfully completed in the past 5 years
 - was awarded academic credit (not a C.E. course)
7. The document for your request must be complete and submitted for consideration before any portion of it can be reviewed.
8. Your request for credit packet must include*
 - Cover letter
 - Completed Prior Academic Accomplishment Form including:
 - Your name and KUID number
 - The course title and course number of the course you are requesting credit for in the NTPD program at KU
 - The course title and course number of the course you have completed
 - The university the course was completed at
 - The date the course was completed
 - The number of credit hours received for the course
 - A copy of a transcript including the course for which credit is requested
 - The faculty member in charge of the course you completed

- A brief statement of the principle educational outcomes of the course
- A course syllabus or thorough description of the course topics covered

**See attached PAA form*

9. The Curriculum and Academic Standards committee will review your request during one of the semi-annual meetings. This committee will make the final decision on whether the proposed course is acceptable in lieu of a didactic course in the Non-Traditional Pharm.D. Program.
10. Each request will be reviewed on a case-by-case basis.
11. In the rare event that you wish to request credit for a course that does not fit all of the criteria described in this document, you must include additional documentation supporting your request. This documentation must include **examples** of your use of the skills and training you are requesting the Non-Traditional Pharm.D. Program accept in lieu of a didactic course. Specific examples where this may be necessary include, but are not limited to, courses completed over five years ago in an area that you use daily and are regionally or nationally recognized as an expert, or courses completed in another degree program that encompass the course you are requesting exemption from.

Prior Academic Accomplishment Form

1. Your name (Last, First, M.): _____

2. Your KUID: _____

3. NTPD course (with number) requesting credit for: _____

4. Course title (with number) you have completed: _____

5. Date course was completed: _____

6. University the course was completed at: _____

7. Credit hours **and** grade received for Course: _____

8. What educational outcomes did you attain from the course: _____

9. Faculty member that taught the course _____

10. Include with this form:

- Cover letter **clearly** outlining your request.
- Copy of transcript that includes the course for which credit is being requested.
- A course syllabus (If no syllabus is available a letter from the faculty member responsible for the course outlining the objectives and topics covered should be sent. It is the student's responsibility to contact the faculty member & request that the letter be sent to the NTPD office).
- Additional documentation if your request is not exclusively within the guidelines outlined in this document.

*requests for courses that don't fit the criteria and don't contain additional documentation will be returned without review!

Applicant Signature: _____

Date: _____