

Articulation Request and Agreement

Discipline:	
High School:	
High School Course:	
Columbia College Course:	
Date Accepted:	
Renewal:	

This request and agreement is submitted for consideration of the following course as an articulated course at Columbia College. Students would receive course credit at Columbia College.

Directions:

- Complete a separate form for each course.
- Attach the course outline for the course.
- Attach the course final if course is to be considered for credit.
- Mail to: Dean of Career Technical Education, 11600 Columbia College Drive, Sonoma, CA 95370

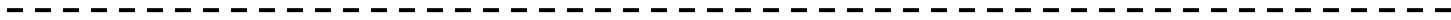
Completed by High School Instructor:

High School/ROP:	
Instructor Name:	
Mailing Address:	
Email Address:	
Contact Number:	

High School / ROP/CTE Course Title:	
High School / ROP/CTE Course Description:	

College Course Title:	
College Units:	HS/ROCP Credits:
College Prerequisite(s):	HS/ROCP Prerequisite(s):
Advisories/Recommendations:	
Course Content and Format::	
Competencies and Skill Requirements (Use additional pages as necessary)	

<i>At the conclusion of this course, the student should be able to:</i>	
Measurement Methods (include any industry certification or licensure):	
Sample Textbooks or Other Support Materials (including Software):	
CC faculty Signature:	Date:
<i>[Office use only.]</i> TOPs Code:	<i>[Office use only.]</i> Internal Tracking Number:



Completed by Columbia College

This portion is completed after CC faculty and H.S. faculty meet and agree on the terms of the articulation agreement.

Department Faculty Signature	x	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	___/___/2017
CTE Dean Signature	x	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	___/___/2017
CTE Transition Officer Signature	x	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	___/___/2017
Admissions and Records Notified			___/___/2017
High School Notified			___/___/2017