

ARTICULATED CREDIT

CAREER/TECHNICAL EDUCATION COURSE ARTICULATION CREDIT REQUEST

Complete at the high school and submit to the college Records Office

Student Name:		
Student Identification Number:	Phone:	
Mailing Address:		
High School:	Counselor:	
This student plans to enter _____		
<small>(Postsecondary Program of Study)</small>	<small>(Semester)</small>	<small>(Year)</small>

CAREER/TECHNICAL courses for which articulated credit is requested

High School Program:	Graduation Date:	
Course Title	Course Grade	Syllabus on File?

I certify that the above named individual successfully completed the courses listed above.

Signature of Secondary Teacher or Career/Tech Administrator _____ Date _____

Signature of High School Counselor _____ Date _____

Submit to Records Office, Gadsden State Community College, 125 Allen Hall, FAX 256.549.8466

For College Use Only

Courses for which credit is to be awarded	Date Credit Awarded

Signature of the Program Coordinator: _____ Date: _____

Signature of Registrar or Designee: _____ Date: _____

- Secondary school faculty credentials approved and on file in Records Office
- Secondary school course of study and/or syllabus on file in the student record
- Current Local or Statewide Career/Technical Education Course Articulation Agreement is in effect for the postsecondary course for which articulation credit is sought (<http://www.accs.cc/articulation.aspx>, Appendix A)

It is the policy of the Alabama Community College System that no person shall, on the grounds of race, color, disability, sex, religion, creed, national origin, or age be excluded from participation in, be denied the benefit of, or be subjected to discrimination under any program, activity, or employment.