



Dual Credit Course/Instructor Approval Request

This form is to be completed by the high school to request approval for specific courses to be offered for dual credit in partnership with Wayne State College.

Date: _____

High School Name: _____

High School Contact: _____ Title: _____

Address: _____

City/State/Zip: _____

For the following, please reference the WSC (Wayne State College) catalog and website for course information:

WSC course requested for dual credit and term(s) to be offered. (For a course that is to be offered twice during the academic year to different student groups in the fall and in the spring, check both Fall and Spring. If your intent is to offer the course once but spread it across both semesters, then check Full Year):

Course	Instructor	Term (Check One)		
		Fall	Spring	Full Year

Please include the following materials for course approval:

Course Approval Request (this form)

Current Instructor Resume/Vitae

Course Syllabus (Courses offered for dual credit should reflect the concepts taught in current WSC courses which can be found on current syllabi.)

Copy of graduate transcripts showing degrees conferred (copies of official transcripts from school personnel files will be accepted.)

Approvals:

High School Administrator: _____ Date: _____
 (This signature will be used instead of a letter of support as a recommendation for the instructor(s))

Academic Dean: _____ Date: _____

VP of Academic Affairs: _____ Date: _____