Montgomery County
Community College

STUDENT ARTICULATION APPLICATION

Please complete this form with the assistance of your Guidance Counselor. Submission must be word processed.

Student Name: _____ College ID: _____

Home Address: _____

CTE Program of Study: CIP #: _____ CIP Program Name: _____

This form is to verify that the above named student has successfully completed _____ at _____. If the requirements for College admission and articulation are fulfilled, she/he will qualify for advanced standing, preferential admission or college credit in the_____. To have advanced standing or credit(s) posted to the college transcript, the student must earn a minimum of 3 credits at the College. *Transcripted credits are designated "CL" (credit through life experience) not a letter grade.*

College Course(s)	Credits

The below signature and attached official transcript verify that the above student has obtained a final grade of "B" or better for each approved articulated course/program and should be awarded articulated status for the listed College course(s) or program as outlined in the articulation agreement.

VERIFIED BY:

Administrative Signature Technical/High School Date

_____
Administrator Name

Upon completion of this form, provide your guidance counselor with a copy, keep a copy for yourself then send the original form and official transcript to:

Director of Dual Enrollment
Montgomery County Community College
101 College Drive
Pottstown, PA 19464

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☐ Advanced Standing ☐ College Credit ☐ Preferential Admission *granted per articulation agreement*

Director of Dual Enrollment Date Revised: 9/14