



Dual Credit New Course/Instructor Application

General Information

High School _____

High School Address _____

High School Point of Contact/Title _____

School Representative for Entering Grades _____

Title and Date of Birth _____

Grade Representative Email _____

Course Information

High School Course Name _____

Length of Course (Yearlong/Semester/Trimester) _____

Number of Contact Hours _____ Lab Hours (if applicable) _____

Dual Credit Instructor Information

Instructor Name _____ Email _____

Years Teaching in Subject Area _____ Years Professional Experience in Subject Area _____

Graduate Degree Earned _____

Undergraduate Degree Earned _____

Additional Credentials _____

Additional Experience in Course Subject _____

Additional Instructions

- Please attach the current syllabi and any supporting documentation/assessments
- Please attach copies of instructors educational transcripts and any additional supporting documentation (i.e, certificates, resume, etc.)
- Please email this application and supporting documentation to Metra Augustin, Director of K12 Initiatives at maugustin@georgefox.edu