

ARCC Concurrent Enrollment Program
Course Confirmation Form

Partner High School: _____

Partner High School Primary Contact Name (s):

Contact Information:

Email: _____

Phone: _____

Please enter the Course title, high school instructor, and dates the course will run. Please be specific on start and end dates - this will dramatically improve accuracy of information. With our new Minnesota State pricing structure, courses are charged on a per mentor mentee relationship, per course, per term. Trimester 1 only, and yearlong courses are considered Fall term courses. Courses that start in Tri 2 or 3 are spring term courses. Feel free to add or delete tables to account for all classes.

Preliminary Course Confirm. - **Due April 1st** – OK if exact dates/terms unknown at this point.

Final Course Confirm. - **Due June 1st** – All dates/terms listed will be what is run/charged.

Course Title EX- ENGL 1121- College Writing and Critical Reading	High School Instructor John Smith
Dates the course will run. Please check all terms that apply and the enter the specific dates: <i>(Information in parentheses indicates when the class will be charged)</i> <input type="checkbox"/> Yearlong- (Fall) Start: _____ End: _____ <input type="checkbox"/> Trimester 1 only- (Fall) Start: _____ End: _____ <input checked="" type="checkbox"/> Trimester 2 only -(Spring) Start: <u>12/5/2017</u> End: <u>3/8/2018</u> <input type="checkbox"/> Trimester 3 only - (Spring) Start: _____ End: _____ <input type="checkbox"/> Runs over Trimester 1 and 2 (Fall) Start: _____ End: _____ <input type="checkbox"/> Runs over Trimester 2 and 3(Spring) Start: _____ End: _____ <input type="checkbox"/> Runs in Trimester 1 and 3 (Fall) Start: _____ End : _____	

Course Title	High School Instructor
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