



**CTE DUAL CREDIT**  
**2022-2023**  
**Teacher Verification**  
**Form**

To be completed EVERY SCHOOL YEAR by High School Faculty members teaching CTE Dual Credit eligible courses.

Teacher: \_\_\_\_\_  
Last Name / First Name

High School: \_\_\_\_\_ District: \_\_\_\_\_

High School Address: \_\_\_\_\_  
Street City Zip Code

Phone: \_\_\_\_\_ Ext.: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**Alternate Contact Information**

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

*This information will ONLY be used to contact you if student grades are not entered in the online registration system by June 30, 2023.*

I certify that in 2022-2023 I will teach high school courses that meet 80% of the competencies outlined in the following articulation agreements:

Articulation Agreement Title: \_\_\_\_\_

List high school course or sequence of courses required for meeting 80% of competencies (HS course name must match course name on HS transcript):

HS Class 1 Name & Course Code: \_\_\_\_\_ One Semester/Trimester  Year Long

HS Class 2 Name & Course Code: \_\_\_\_\_ One Semester/Trimester  Year Long   
 This is the same information as last year.

Articulation Agreement Title: \_\_\_\_\_

List high school course or sequence of courses required for meeting 80% of competencies (HS course name must match course name on HS transcript):

HS Class 1 Name & Course Code: \_\_\_\_\_ One Semester/Trimester  Year Long

HS Class 2 Name & Course Code: \_\_\_\_\_ One Semester/Trimester  Year Long   
 This is the same information as last year.



By signing this form I understand that I am responsible for the following:

- Teaching 80% of competencies outlined in the articulation agreements.
- Sharing the opportunity to earn FREE CTE Dual Credit with your current students.
- Submitting grades into the online registration system by June 30, 2023.

\_\_\_\_\_  
Teacher Signature

[Click here to enter a date.](#)  
Date

\_\_\_\_\_  
Career & Technical Education Director Signature

[Click here to enter a date.](#)  
Date

CTE Personnel - Mail Form to: PC3 College Credit  
 4500 Steilacoom Boulevard SW  
 Lakewood, WA 98499  
 Phone: 253.912.2215

**Mail completed form to PC3 no later than 10/31/22**

E-mail: [info@pc3connect.org](mailto:info@pc3connect.org)

Articulation Agreements are available on our website: [www.pc3dualcredit.org](http://www.pc3dualcredit.org)