

## CTE TRANSITIONS HIGH SCHOOL COURSE ARTICULATION AGREEMENT RENEWAL

High School District:	High School Name:		
Discipline:	General Course Title:		
Completion of this form is required by Los Rios Community to be completed by the High School teacher who is teaching		•	
<ol> <li>Please review the attached Articulation Agreement at</li> <li>Please type all information (excluding instructors' sign</li> </ol>	_	College	
Academic Year of This Renewal:			
The Following Information Should Be C	ompleted by High School/ROP II	nstruct	or:
HS/ROP Course Title:			
Are you interested in renewing the Articulation Agreement with the College for this course? (circle one:) (If you have answered no, you may skip to signature and date section and return this form to the college by mail or email.)			No
Has the High School Course been changed since the mostly recently signed agreement? (circle one:) (If the answer to this question is yes, please attach the <u>new course outline</u> for review by College Faculty)		Yes	Ø
HS Instructor's Name (print):	HS Instructor's Signature:	Date:	
The Following Information Should Be C	ompleted by the College Faculty	Memb	er:
College Course Title:	College Course Number:	College Units:	
Faculty Facilitator's Name (print):	Signature:	Date:	

Note: Renewal is required every two years; the next renewal is two years from the date signed.

Version: 9/14/11