	To be completed EVERY SCHOOL YEAR	t by High School faculty members teaching Dual Credit eligible courses
ech	Teacher Name:	
	(First)	,(Last)
	High School:	_District:
TECH PREP/	High School Address:	
DUAL CREDIT		Extension:
2017 - 2018		
Teacher	Email:	
Verification Form	Alternate Contact Information: Phone ()Email: tudent grades are not entered in the online registration system by June 22, 2018
**Return to WVC by 10/16/17	Please send original, complete	d form to WVC Office by: October 16, 2017
I certify that in 2017-2018 I will teach high school courses articulations listed by school (www.wvc.edu/techprep	-	n the articulation agreement with WVC. Refer to Tech Prep website for
College Course Name & Course Number	·	
List high school course or sequence of courses required for mee		
(HS Class 1 Name:)		Year long course: 🛛 Yes 🛛 No
(HS Class 2 Name:)		Year long course: 🛛 Yes 🛛 No
		☐ This is the same information as last year
College Course Name & Course Number:		
List high school course or sequence of courses required for mee	iting 100% of competencies:	
(HS Class 1 Name:)		Year long course: Ves No
(HS Class 2 Name:)		Year long course: 🛛 Yes 🛛 No
		☐ This is the same information as last year
By signing this form I understand that I an	n responsible for the following:	
Teaching 100% of competencies out	tlined in the articulation agreements	Return Form to: Wenatchee Valley College
 Informing students of the Dual Credit opportunity Submitting grades into the online registration system by June 22, 2018 		Attn: Dianna Howell Instruction Office, Wells Hall 1070
		1300 Fifth Street
	/	Wenatchee, WA 98801 dhowell@wvc.edu/(509) 682-6603
Teacher Signature	Date	Tech Prep information including: registration instructions,
	/	articulation request instructions, competencies and articulations
Career & Technical Education Director Signature	Date	listed by school are posted on our website:: www.wvc.edu/techprep