LOUISIANA TECH UNIVERSITY

LOUISIANA TECH UNIVERSITY
DUAL ENROLLMENT COURSE PROCESSING FORM, 2017-18

Please complete one form for each course or course sequence {e.g. MATH 101/102: HIST 201/202}

1. Course, number, and title of college course {e.g. Engl 101: Freshman Composition}.

   _____

2. High school information

   Name of High School: _____

   Mailing Address: _____

   Name & Title of Contact Person: _____

   Telephone Number: _____

   Fax Number: _____

   E-mail Address: _____

3. High school course title: _____
4. High school [LDE] course number: _____
5. Academic year: _____
6. Delivery type: ☐ On-site lecture ☐ Internet ☐ Compressed video
7. Dates course will be offered: _____
8. High school instructor/facilitator: _____
9. Contact information for high school instructor:

   School-Phone: _____ E-mail: _____

   Home-Phone: _____ E-mail: _____

   Home Address: _____
   Street City State Zip

10. List instructor's educational attainments (degree {s}; university; year degree{s} earned, or note that "degree is in progress.")

    _____

    _____

If you have questions, please contact:

Alicia Kimbell, Dual Enrollment Coordinator, 318.257.3031, aliciam@latech.edu

If you are new to Tech's program, please also attach a copy of your college transcript (s) to this form and return it to:

Enrollment Management
Louisiana Tech University
P. O. Box 3146
Ruston, LA 71272 or
fax to 318-257-2908