

**Saginaw Valley State University**  
**Credit Application, Recommendation, and Approval Form**  
**For Career and Technical Education Center/High School**  
**Articulation Credit**

For TE 120 and 200 or for TEMS 100

FERPA guidelines will be followed: (<http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html>).

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**Application Deadlines:** This credit form must be *received* for consideration in the College of Education (COE) dean's office within five (5) years of the eligible student's high school graduation. Additionally, the student's University application and admission within three (3) years of high school graduation are prerequisite to submission of this request form for articulated credit.

**Section I: Student-Candidate Applying for Articulation Credit Consideration**

Student's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Phone with Area Code: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Home Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Full High School Name: \_\_\_\_\_

H.S. Grad. Month/Year: \_\_\_\_\_ Student's 7-Digit SVSU I.D.: \_\_\_\_\_

I either have already arranged or will arrange for my **final-official** high school transcript (with posted graduation date) to be sent to SVSU's undergraduate Office of Admissions.

Anticipated SVSU Sem./Yr. Start\*:  Fall (August)  Winter (January) Year (specify): \_\_\_\_\_

Student Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Section II: Recommending Career and Technical Education (CTE) Center/High School**

**(Recommendations should be made only for those student-candidates having met all requirements as stipulated in Parts A-E of the corresponding articulation. Refer to the articulation for full details.)**

Full Name of Recommending Institution: \_\_\_\_\_

Student's CTE Program: \_\_\_\_\_ Education General \_\_\_\_\_ CIP Code: \_\_\_\_\_ 13.0000 \_\_\_\_\_

Student's final/overall Grade Point Average in above CTE Program: \_\_\_\_\_

Instructor Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I, the recommending CTE program instructor, attest that the student identified in Section I above (**Check all statements that apply**):

has demonstrated success in all thirty-five (35) competencies of the indicated program with a final grade of "B" or higher (3.0 or greater on a 4.0 scale) in the program.

has completed the field work component for CTE's Education General (CIP 13.0000) program with a final grade of 'B' grade or higher (3.0 or greater on a 4.0 scale).

●Printed Name of Recommending Instructor: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

●Printed Name of Approving Principal: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Recommending School Sends Completed Form and Supporting Documents:**

Saginaw Valley State University  
ATTN: College of Education Dean's Office  
Gilbertson Hall, RM N275  
7400 Bay Road  
University Center, MI 48710-0001 U.S.A.

Fax: 989.964.4563  
Phone: 989.964.7107  
Email: coe-dean@svsu.edu

**Section III: Saginaw Valley State University College of Education (COE) Determination**

SVSU Program: **COE Certification Office, per record review, identifies appropriate SVSU credit (either TEMS 100 or both TE 120 and 200) for each candidate's intended academic program and teaching focus.**

SVSU Equivalent Course for which articulation credit is being considered for applicant:

TE 120 and 200  TEMS 100:

Having referenced the current, corresponding articulation/transfer agreement for confirmation of associated requirements and Sections I and II of this credit-application form, COE attests that the student has met all stipulated requirements.

Approved  Denied SVSU Faculty Name (Print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied SVSU Dean/College (Print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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SVSU Registrar's Office: Received Date: \_\_\_\_\_ Processed Date: \_\_\_\_\_

Processing Employee (Print & Signature): \_\_\_\_\_