

## American Sign Language Articulation Agreement Request for Credit Form

Section 1 - to be completed by <i>HIGH SCHOOL STUDENT</i> (please print neatly or type)	
Student Name	
Mr. / Ms	
Address	
City / State / Zip Code	
City / State / Zip Code	
E-mail address	Phone Number
	( )
Student Signature	Parent / Guardian Signature (Required for students under age 18)
High School Student	
Complete your American Sign Language Course with a grade of "B" / 3.0 or better.	
Obtain a completed "Competency Profile Sheet" signed by your instructor.	
Obtain your instructor's signature at the bottom of this form.	
4. Complete this Request for Credit Form including your signature and your parent / guardian signature.	
5. Complete the SCC Registration form (see your instructor for details).	
6. Mail the original Request for Credit form, the SCC Registration form, the Request for Student Identification Number (SID), and the	
Competency Profile Sheet with a check for \$35.00. Make copies of your forms for your records. SCC must receive your forms and	
fees no later than the deadline date.	
7. Make the check payable to Seattle Central College	
Mail / deliver to: Seattle Central College	
	ige Articulation Agreement
Attn: Barbara Hayes, 0 Humanities and Social	
1701 Broadway; Mailst	
Seattle, WA 98122	
The \$35.00 fee is non-refundable. A receipt verifying the transaction will be mailed to the above address. You can obtain an official	
transcript for \$4.50 per transcript from the Registration and Records Office (Transcripts) 1701 Broadway 2BE1104, Seattle,	
Washington 98122; Telephone 206.934.3805.	
Section 2 - to be completed by HIGH SCHO	
Instructor Name	Name of High School
E-mail	Phone
SCC ASL Course Level (check one)	Anticipated or actual grade (3.0 - 4.0)
OOO AOL COURSE LEVER (CHECK OFFE)	Please indicate by grade point
ASL 121 ASL 122 ASL 123	
Course completion date (mm/dd/yy)	Instructor Signature
Course completion date (min/du/yy)	moducior dignature