Dual Enrollment New Course Request Form

This form must be submitted and the course approved before students are enrolled.

The proposed course must meet course enrollment requirements at Wytheville Community College. The college has the responsibility to ensure that all dual enrollment courses taught are equivalent to other instruction offered by the college, specifically in terms of course objectives, components of the syllabi, level and rigor of content, evaluation of students, textbooks, student outcomes and assessment, and faculty evaluation.

High School ________________________________

Course Prefix ________________________________

Course Name ________________________________

*Credentialed Instructor __________________________

Placement Test Requirements __________________________

Number of Minutes Required __________________________

Time/Weekdays Class Will Meet __________________________

Semester Class will be Offered __________________________

Text Book Required ________________________________

*ALL NEW INSTRUCTORS MUST COMPLETE WCC APPLICATION PACKETS. Please provide name, email and mailing address for all NEW instructors.

Name ________________________________ Email ________________________________

Street ________________________________ City ________________________________ State ________________________________ Zip ________________________________

SIGNATURES

__________________________________________  ________________________________
Administrator, Director, or Principal  Academic Dean

__________________________________________  ________________________________
Counselor or other Designee  Dual Enrollment Coordinator

Return to:
Joshua Floyd, Coordinator of Dual Enrollment
Bland Hall, Room 102A
Email: jfloyd@wcc.vccs.edu
Fax: (276) 223-4861