



FLORIDA INTERNATIONAL UNIVERSITY

## ARTICULATION AGREEMENT REQUEST FORM

The following information is needed to complete Dual Enrollment (DE) Articulation Agreement:

### SCHOOL INFORMATION

School Name: \_\_\_\_\_

Abbreviated name/acronym to be used when referencing the school in the agreement: \_\_\_\_\_

Legal Status (e.g., private, charter or public school): \_\_\_\_\_

School ID (if applicable): \_\_\_\_\_

School Address: \_\_\_\_\_

School Website: \_\_\_\_\_

Accredited by: \_\_\_\_\_

Has the school completed the [Annual Private School Survey](#)? (if applicable): \_\_\_\_\_ Yes \_\_\_\_\_ No

### AGREEMENT SIGNATORY PARTIES

Name: \_\_\_\_\_

Title: \_\_\_\_\_

### GENERAL QUESTIONS

Has the school previously entered into a DE Articulation Agreement with FIU? \_\_\_\_\_ Yes \_\_\_\_\_ No

Anticipated start term (Fall, Spring or Summer) \_\_\_\_\_ / year \_\_\_\_\_

Please print, complete and email form to:

Danay Barata, Program Coordinator

Academic Planning and Accountability

dbarata.fiu.edu

Completed by: \_\_\_\_\_

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