

Saginaw Valley State University
Credit Application, Recommendation, and Approval Form
For Career and Technical Education Center/High School
Articulation Credit
KINE 100/120 Partnership

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

Application Deadlines: This credit-request form may be submitted to SVSU pending the student-applicant's high school graduation but must be *received* for consideration in the appropriate dean's office within one (1) to two (2) calendar years of the eligible student's high school graduation *while initial American Heart Association (AHA) or American Red Cross (ARC) Basic Life Support (BLS), Healthsaver First Aid (FA), and Bloodborne Pathogens (BBP) certification is still valid.* Additionally, the student's University application, admission, and successful completion of 12 SVSU credits are prerequisite to submission of this credit-request form.

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

Anticipated H.S. Grad. Month/Year: _____ Student's 7-Digit SVSU I.D. # (if known): _____

Anticipated SVSU Sem./Yr. Start*: Fall (August) Winter (January) Year (specify): _____
(*University-level application may be made to SVSU after Grade 11 marks post to the student's h.s. transcript: www.svsu.edu.)

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 B, D, and E of the corresponding articulation. Refer to the articulation document for full details.)

Full Name of Recommending Institution: _____

Student's CTE Program: _____ CIP Code: _____

Student's overall Grade Point Average in above CTE Program*: _____
(*Must include at least the first semester of the senior year.)

- Having reviewed the corresponding articulation/transfer agreement, I attest that the student has met all stipulated requirements.
- The student's **current, official** high school transcript (including CTE credits and grades) is being provided to the appropriate SVSU dean's office in support of this recommendation form.

A copy of the student's AHA or ARC BLS, FA, and BBP certification accompanies this form, and the student has been notified of the need to have the official report sent to SVSU's College of HHS directly from the certifying agency.

Instructor Comments: _____

● Printed Name of Recommending Instructor: _____

Signature: _____ Date: _____

● Printed Name of Approving Principal: _____

Signature: _____ Date: _____

This form: Mailed Faxed to Appropriate SVSU dean's office on (mm/dd/yyyy): _____

Mailing/Fax Information: Recommending School Sends Completed Form & Supporting Documents:

Saginaw Valley State University
ATTN: College of HHS Dean's Office
Health & Human Services, Rm. H260
7400 Bay Road
University Center, MI 48710-0001 U.S.A.

Fax: 989.964.4024
Phone: 989.964.4145

Section III: Saginaw Valley State University College of HHS Determination

SVSU Program: College of Health & Human Service Major of Choice

SVSU Equivalent Course for which articulation credit is being considered: KINE 100 & 120

Having reviewed the corresponding articulation/transfer agreement, HHS attests that the student has met all stipulated requirements, including but not limited to passing the standardized assessment and passing the KINE interview and supplying SVSU's College of HHS with the necessary transcript; CTE certificate; and AHA or ARC BLS, FA, and BBP certificate.

Approved Denied SVSU KINE 100/120 Faculty (Print): _____

Signature: _____ Date: _____

Approved Denied SVSU Dean/College (Print): _____

Signature: _____ Date: _____

SVSU Registrar's Office: Received Date: _____ Processed Date: _____

Processing Employee (Print & Signature): _____