



**APPLICATION FOR ARTICULATED CREDIT AWARD FOR HIGH SCHOOL STUDENTS**

Submit request for Articulated Credit Award and attach **FINAL HIGH SCHOOL TRANSCRIPT**

Send to: Susan Curry, Director, College Articulations  
 North Shore Community College  
 One Ferncroft Road  
 Danvers, MA 01923

Questions may be directed to:  
 Susan Curry  
**phone 978 762-4000 x 5521**  
**email scurry@northshore.edu**

**STUDENT INFORMATION**

Name \_\_\_\_\_ Student ID \_\_\_\_\_  
Last First M.I.  
 Address \_\_\_\_\_ Email \_\_\_\_\_  
 \_\_\_\_\_ DOB \_\_\_\_\_

**HIGH SCHOOL INFORMATION**

High School \_\_\_\_\_ YOG \_\_\_\_\_

High School Courses	Grade	NSCC Course Title	Course No.	Credits
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**CREDIT AWARD**

I have reviewed the above material and approve the award of the stated credits based on the articulation agreement on file.

\_\_\_\_\_  
 North Shore Community College Representative Date

\_\_\_\_\_  
 Center for Alternative Studies Representative Date

<b>COLLEGE USE ONLY</b>		
Math Proficiency	Communications Proficiency	Prerequisite, if required
___ CPT _____	___ CPT _____	_____
___ SAT _____	___ SAT _____	_____
___ Course _____	___ Course _____	_____