Student Name				
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## Career-Technical Credit Transfer (CT)<sup>2</sup> Verification of Course Completion Form

Instructions: Students complete Part I of this form and submit it to their career-technical teacher/CTE official to complete Part II and Part III. To ensure award of credit, all parts of the form and evidence that the student has met all requirements for accessing the credit should be submitted together to each institution of the student's choice. The Verification of Course Completion Form must be sent by a school official and not submitted by the student. This form should only be used for CTANs <u>not</u> associated with a WebXam as a requirement for credit.

PART I: To be completed by the student requesting verification.		
First Name:	Last Name:	Middle Initial:
Date of Birth:		
High School Graduation	Date:	
Home Address:		
Primary Phone:	Secondary Phone:	
Email:		
Please send this form to	the following college/university:	
	you're interested in attending offers a similar progrece credit by visiting the <u>Transfer to Degree Guarantee</u> you attended (Step 2).	
Name of Institution:		
College Department/Off	fice:	
Address:		
Name of Institution:		
College Department/Off	fice:	
Address:		
Student Signature:	ı	Date:

Student Name		

## PART II: To be completed by a teacher/official from the career-technical education institution.

CTAN	CTAN Name	Credit hours (semester)	Course Completed (Term/Year)	Initial here to indicate that the student has met all requirements to access post-secondary credit*
CTAUT005	Introduction to Automotive Service and Repair	2		
CTAUT006	Introduction to Medium and Heavy Transportation Equipment Technology	2		
CTEMS001	Emergency Medical Responder	2		
CTEMS002	Emergency Medical Technician	7		
CTEMS003	Advanced Emergency Medical Technician	8		
CTEMS004	Paramedic	30		
CTVFF001	Volunteer Fire Fighter	1		
CTFF002	Fire Fighter I	7		
CTFF003	Fire Fighter II	11		
CTCF001	Sanitation and Safety	2		
CTIT017	Cisco I: CCNA7 – Introduction to Networks	3-4		
CTIT018	Cisco II: CCNA7 – Switching, Routing, and Wireless Essentials (SRWE)	3-4		
CTIT019	Cisco III: CCNA7 – Enterprise Networking, Security, and Automation (ENSA)	3-4		
CTLPRN001	Practical Nursing	10		
CTS001	10 Hour Safety	1		

<sup>\*</sup>The student must successfully complete the course and complete any credentialing requirements outlined on the CTAG document. Students must access the credit within three years of graduation. A list of requirements for credit can be found at:

 $\frac{https://www.ohiohighered.org/sites/default/files/uploads/transfer/CT2/2020\_Feb\%2010\_CTAG\%20Guidance\%20Do\_cument.pdf$ 

CTAG/CTAN approval may be verified by visiting the <a href="Course Reporting System">Course Reporting System</a>.

Student Name		

## Part III: To be completed by an administrator/director from the CTE institution.

Name of institution:	
Address:	
Name of (CT) <sup>2</sup> Contact Person:	
Title of (CT) <sup>2</sup> Contact Person:	
Phone:	
Email:	
Signature of (CT) <sup>2</sup> Contact Person:	
Date:	

OFFICIAL SEAL OR STAMP HERE

## **Contact Information**

If problems arise during the process, contact the appropriate institution representative:

- Higher Education Institution
- <u>Career-Technical Education Institution</u>

Questions about CTAG requirements may be directed to Ohio Articulation and Transfer Network staff at:

Nikki Wearly 614.728.2662 nwearly@highered.ohio.gov