



UNIVERSITY OF ARKANSAS  
PULASKI TECHNICAL COLLEGE

Early College High School Concurrent Enrollment Program

# PARTNERSHIP REQUEST FORM

Please complete and return all 3 forms and submit to **[concurrent@uaptc.edu](mailto:concurrent@uaptc.edu)**

## High School Information

School Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Number: _____

## Contact Person Information

Name: _____
Title: _____
Email Address: _____
Phone Number: _____

## Principal Contact Information

Name: _____
Email Address: _____
Phone Number: _____

## High School Signatory

Name: _____
Title: _____

For questions, contact **[concurrent@uaptc.edu](mailto:concurrent@uaptc.edu)**



UNIVERSITY OF ARKANSAS  
PULASKI TECHNICAL COLLEGE

Early College High School Concurrent Enrollment Program

# COURSE REQUEST REQUEST FORM

Please complete and submit to [concurrent@uaptc.edu](mailto:concurrent@uaptc.edu)

Fall or Spring	College Course Name	High School Equivalent Course	High School Provided Instructor or UA-PTC Instructor?	Has HS instructor taught at UA-PTC before? If so, when was their last semester?	If applicable, High School Instructor Name

For questions, contact [concurrent@uaptc.edu](mailto:concurrent@uaptc.edu)



UNIVERSITY OF ARKANSAS  
PULASKI TECHNICAL COLLEGE

Early College High School Concurrent Enrollment Program

# PAYMENT RESPONSIBILITY FORM

Please complete and submit to **concurrent@uaptc.edu**

Please indicate below who will be responsible for payment of tuition, course materials, and inclusive access fees. For more information about the Early College Concurrent Enrollment program visit, **www.uaptc.edu/early-college**

High School:			
Class	Tuition Responsibility (Student or School)	Course Materials and Inclusive Access Fees (Student or School)	Notes

For questions, contact **concurrent@uaptc.edu**