

**Morton College**  
**Dual Credit (DC) and Early College (EC) Course Request**

High School: \_\_\_\_\_

High School Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

High school course duration (year or semester) \_\_\_\_\_

How many sections of the course will you offer per semester? \_\_\_\_\_

Semester(s) to offer dual credit course: Fall 20\_\_\_\_ Spring 20\_\_\_\_

High School Fall semester start date and end date: \_\_\_\_\_

High School Spring semester start date and end date: \_\_\_\_\_

**Course options** –Please check one and fill out corresponding information box

(For additional details on each option, please refer to the Dual-Credit Guidelines)

- Option A.** A Morton College course will be offered during the school day at a district high school and will be taught by a high school teacher as part of his/her regular teaching assignment. Students earn college credit and high school credit and no tuition will be charged. Dual Credit only.
- Option B.** A Morton College course will be offered on the college campus, scheduled based on the needs of the high school. Only College credit is awarded. Students may be responsible for paying tuition and fees. Early College (Dual Enrollment only)

**Option A**

**Course information:**

High School Course Name: \_\_\_\_\_

Course instructor: \_\_\_\_\_

Anticipated Morton College Course equivalent (if known): \_\_\_\_\_

Textbook to be used (title, author, ed.): \_\_\_\_\_

Student pre-requisites for enrollment: \_\_\_\_\_

**Please attach the following items: (Required)**

- Course Syllabus
- Instructor Information Page

**Option B**

Morton College course: \_\_\_\_\_

Proposed times and days of the course: \_\_\_\_\_

Estimated number of students interested in enrolling: \_\_\_\_\_

Please describe the facilities and technology needed.

(For example, computer labs, LCD projector, internet access, overhead projector etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Time Lines**

This form should be completed by high school staff and submitted for approval no later than March prior to the upcoming school year for both Fall and Spring Semesters and for each dual credit/Early College course regardless if a new or renewal course.

If you have questions please contact the appropriate academic division dean.

**Academic Division Dean Contact Information:**

Dr. Tom Pierce– Career & Technical Ed  
[Tom.Pierce@morton.edu](mailto:Tom.Pierce@morton.edu)  
708-656-8000 x2367

Dr. Derek Shouba – Assoc. Provost Arts & Sciences  
[Derek.shouba@morton.edu](mailto:Derek.shouba@morton.edu)  
708-656-8000 x2331

Marlena Avalos-Assoc. Dean of Academic Services  
[M.Avalos-Thompson@morton.edu](mailto:M.Avalos-Thompson@morton.edu)  
708-656-8000 x2245

Dr. Lydia Falbo-Dean of Nursing & Health Sci.  
[Lydia.Falbo@morton.edu](mailto:Lydia.Falbo@morton.edu)  
708-656-8000 x2264

*To complete the approval process the Morton College Assoc. Dean of Academic Services will schedule a meeting with the course instructor to verify course information and provide additional information on Morton College policies, deadlines, grading procedures.*

**Please submit forms to:**  
**Marlena Avalos**  
**Assoc. Dean of Academic Services**  
**Morton College**  
**3801 South Central Avenue**  
**Cicero, IL 60804**

<p>Morton College use only:</p> <p><input type="checkbox"/> Course approved as listed; Morton College program approval: _____</p> <p><input type="checkbox"/> College section/course created in Colleague</p> <p><input type="checkbox"/> Fees added/removed from course/sections</p> <p><input type="checkbox"/> Bookstore informed of textbook/material needs (if applicable)</p> <p><input type="checkbox"/> Instructor information forwarded to Morton College Deans' Office</p> <p><input type="checkbox"/> Instructor informed about expectations/given Admin manual</p> <p>Morton College academic division dean signature: _____ Date: _____</p>
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