EMBRY-RIDDLE AERONAUTICAL UNIVERSITY
Extended Campus

ALLAN HANCOCK COLLEGE

Articulation Dual Admission Form

The primary purpose of an articulation agreement is to assure that coursework taken at another institution will transfer to ERAU and satisfy specified degree requirements. The student becomes subject to the requirements of the curriculum in the specified catalog at the time of enrollment and is assured that courses taken will apply even though the curriculum may have undergone significant change prior to the student's actual enrollment at the University. Please review the articulation agreement prior to completing the enrollment form.

Student Information

Student Name: _____
Last First Middle Social Security Number (reqd. for Govt. Benefits)

Address: _____
Number Street City State Zip Code

Telephone Number: _____
(Area Code) Home Number (Area Code) Work Number E-mail address

Associate Degree Program _____ Catalog Year _____

Articulation Institution Attending: _____
Name City State

Enrolled From: _____ To: _____
Month/Day/Year Month/Day/Year

Transfer Information

ERAU Degree Program: _____ Desired Start Date: _____
Semester/Term/Year

Student Signature: _____ Date: _____
Month/Day/Year

Upon signing this agreement, the student will be considered dually admitted to Alan Hancock College and Embry-Riddle Aeronautical University (ERAU). A copy of the completed Articulation Dual Admission Form **MUST** accompany your Application for Admission to ERAU. After graduation from Alan Hancock College , the following will complete the application process and allow the student to continue in the ERAU four year program:

1. ERAU will waive any application fees.
2. Only those classes with a grade of "C" or better that are applicable to Embry-Riddle's program will be accepted.
3. Submission of all original transcripts from all colleges attended.
4. ERAU will become the official school for financial aid and/or verteran's benefits upon official transfer to ERAU.
5. Once accepted into an ERAU degree program, the student will be subject to the rules and regulations of ERAU.

Institution Representative _____ Date _____

ERAU Representative _____ Date _____