



Admissions and Records
 5151 Pacific Avenue, Box 102
 Stockton, CA 95207
 Email: admissions-followup@deltacollege.edu

Articulation San Joaquin Delta College/ Secondary Application for College Credit

Official High School Transcripts must accompany this application.

Please submit forms to the Admissions & Records Window or to the email indicated above.

Delta ID: _____ Delta Email: _____

First Name: _____ Last Name: _____

High School: _____

Articulated Course Completed at: _____
(If taken at another school in your district- indicate high school name here)

I am applying for the college credit agreed upon in the formal articulation agreement between my secondary school and the San Joaquin Delta College District.

To receive credit, I confirm that I have:

- Successfully completed the courses listed below that were required according to the agreement
- Filed an Application for Admission to San Joaquin Delta College
- Requested credit within two (2) years of course completion or no later than two (2) years after high school graduation

High School Course Name	Equivalent Delta College Course	Office Use
		Approved Denied
		Approved Denied
		Approved Denied
		Approved Denied

 Student Signature

 Date

Office Use

Term:	SJDC Course/CCN: /	Posted Grade:	Date:	A&R:
Term:	SJDC Course/CCN: /	Posted Grade:	Date:	A&R:
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