Procedures for initiating an articulation agreement between Florida Atlantic University and another institution:

1. Complete the information below and obtain preliminary approval to begin work on an agreement by submitting this form for signatures from the Department Chair to the College Dean, then to the Provost’s Office.

2. Ensure that all agreements are reached through interactive meetings between faculty members of each institution from the major programs contained in the agreement.

3. All agreements must comply with all state-mandated and FAU admission and graduation requirements unless a clearly-defined exception is included within the document.

4. Program descriptions should clearly identify common prerequisites and those courses that satisfy Gordon Rule, General Education, Foreign Language, and Core Curriculum requirements and specify that all elements of CLAS must be satisfied for graduation. Programs exceeding a total of 120 credit hours will require additional review.

5. The final draft of the document should be reviewed by and must obtain the signed approval of the Department Chair, College Dean, prior to being forwarded to the Associate Provost for Programs and Assessment. Non-standard agreements may require the review of the University Attorney’s Office.

Type of Articulation Agreement planned (i.e. AS to BS): ______________________________________

Programs to be included in the Agreement: _________________________________________________

____________________________________________________________________________________

Institutions to be involved in the Agreement: ______________________________________________

____________________________________________________________________________________

Identify the need for the Agreement: _____________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

FAU Primary Contact (Name and Email):___________________________________________________

Preliminary approval to proceed with the Articulation Agreement

____________________________________________________________________________________

Department Chair ____________________________ Date

College Dean ____________________________ Date

Associate Provost for Programs and Assessment ____________________________ Date

Revised 8/30/16