

## Concurrent Enrollment Form

**When to Use:** This form is for students who are taking courses at a supplemental school that apply to their ASU degree programs, and who wish to use VA educational benefits for those courses. This requires the approval of an ASU academic advisor to ensure that classes taken at the secondary school will apply to the student's ASU degree program. Once the student and advisor sections of the form have been completed, submit the form to [PTVCforms@asu.edu](mailto:PTVCforms@asu.edu), and an ASU School Certifying Official will complete the form and send a copy to the supplemental school, as specified by the student.

**For Student to complete\***

Student Name: \_\_\_\_\_ ASU Student ID #: \_\_\_\_\_

Student ID# for Supplemental School: \_\_\_\_\_ Student Phone: \_\_\_\_\_

Supplemental School Name: \_\_\_\_\_

Supplemental school email address or fax number to send completed form to:  
 \_\_\_\_\_

\*please also provide supplemental school course titles, numbers and credits for your academic advisor below

**For ASU Academic Advisor to complete:**

Semester \_\_\_\_\_

Supplemental School Course Title	Course Number	Credit Hours	ASU Course Equivalent

Arizona State University will grant credit for the above courses being taken at the above supplemental school.

ASU Advisor Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

ASU Advisor Signature: \_\_\_\_\_

ASU Certifying Official Printed Name: \_\_\_\_\_ Date Sent: \_\_\_\_\_

ASU Certifying Official Signature: \_\_\_\_\_

Submit completed form to [PTVCforms@asu.edu](mailto:PTVCforms@asu.edu) Fax: (480)522-3058

For questions, please call the Pat Tillman Veterans Center at (480)965-7723