



TEXAS WOMAN'S
UNIVERSITY™

Office of the Registrar

Doc Type: _____
Description: _____ / _____
For office use only

Dual Credit Degree Pathway Form

TWU Student ID

Last Name

First Name

Mi.

Check the box for degree pathway of interest below:(example: Biology for health professions)

Semester (FA, SP, SU)_____ Year: 20_____

- Art
- Biology
- Business
- Chemistry
- Communication Science
- Computer Science
- English
- General Studies
- Mathematics
- Political Science
- Theatre

Student Signature	Date

Dual Enrollment Signature	Date

Processed – Registrar	Date

INSTRUCTIONS: Please complete the form and submit to dualcredit1@twu.edu for processing.

The form is in compliance with Texas Higher Education Coordinating Board: rule 4.53(8)

State law (Leg. Senate Bill 25) requires dual credit students who have earned 15 semester credit hours at the institution to file a degree plan with the institution.

State law (Leg. House Bill 1922) with limited exceptions, allow you to be informed about information the University collects about you, to review and obtain the information on this form and to correct any information you believe is incorrect.

Any disclosure of information will be governed by the FERPA act and the dual credit permission form.