Becoming an approved instructor for Eastern Connecticut State University’s Dual Enrollment program is a great way not only to build your resume but to instill higher learning in your classroom. Courses taught through ECSU’s Dual Enrollment program are equal to the same courses taught at Eastern, giving high school students college credits they need to get ahead. Because ECSU Concurrent enrollment instructors are considered Eastern Connecticut State University faculty members, it is necessary for all dual enrollment instructors to meet the qualifications and requirements set by Eastern Connecticut State University. Applicants must have a master’s degree in the discipline they are applying to teach. Each Eastern academic department makes the final decision about who meets their requirements.

To apply to become an ECSU dual enrollment instructor please submit the following:

- A completed application form
- A detailed cover letter describing relevant background and qualifications
- Resume
- Two letters of recommendation, preferably from the principal and department head. If you are the department head, a recommendation from a colleague would be accepted.
- Undergraduate and graduate transcripts (if approved, official transcripts will need to be provided)
- A proposed course syllabus for each course in which certification is being sought

Submit all materials to:

Eastern Connecticut State University
Dual Enrollment Program
Office of Continuing Studies and Enhanced Learning, Winthrop Hall
83 Windham Street
Willimantic, CT 06226

**NOTE:** Instructors may not begin teaching ECSU approved concurrent courses until their credentials have been approved by the university.

Please contact Brittanymarie Barber at Eastern’s Office of Continuing Studies and Enhanced Learning with questions at 860-465-4339 or by email at Barberbr@easternct.edu.
Dual Enrollment Instructor Approval Application

Print clearly

Date ______________________________________________________________________________

O Dr.       O Mr.       O Mrs.       O Ms.

First Name ___________________________________________ Middle Name_____________________

Last Name ___________________________________________ Date of Birth _____________________

Home Address __________________________________________________________________________

City ___________________ State ___________ Zip ____________________

Home Phone ____________________________ Mobile Phone _________________________________

Email Address _________________________________________________________________________

Applying to teach Eastern course(s)________________________________________________________

<table>
<thead>
<tr>
<th>Subject</th>
<th>Course. #</th>
<th>Title</th>
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Institution Information

High School Name _______________________________________________________________________

High School Mailing Address _____________________________________________________________

City ___________________ State ___________ Zip ____________________

High School Phone Number _____________________________ Extension ________________

I understand that obtaining certification requires me to adhere to all standards set by Eastern Connecticut State University. I also understand that professional development and workshop attendance are necessary to remain certified to teach Eastern Concurrent Enrollment courses. My principal has agreed to allow release time to attend Eastern workshops on campus.

Instructor Signature ___________________________ Print __________________________

Principal Signature ___________________________ Print __________________________