

Please fill in the information below. This form is required for each staff member who will be proctoring an online dual credit course.

Name	
High School Affiliation	
Courses for Access	
Email	
Business Phone	
Cell Phone	
Date of Birth	
Have you ever attended Angelo State (either undergraduate or graduate)?	Yes No
	Yes No
If yes, has your name changed since your enrollment?	*If you answered yes to the last two questions, you will also need to officially change your name with ASU. Fill out the <u>Student Information Correction form</u> and include a copy of your Social Security Card. This information can be sent to the dual credit office along with this form. This will result in your student records being updated.
You may return this form by email to <u>dualcredit@angelo.edu</u> or fax to 325-942-2078.	