Career-Technical Credit Transfer (CT)²
Verification of Course Completion Form for Entrepreneurship

**Instructions:** Students complete **Part I** of this form and submit it to their career-technical teacher/CTE official to complete **Part II** and **Part III**. To ensure award of credit, all parts of the form and evidence that the student has met all requirements for accessing the credit should be submitted together to each institution of the student’s choice. The Verification of Course Completion Form must be sent by a school official and not submitted by the student.

**PART I: To be completed by the student requesting verification.**

<table>
<thead>
<tr>
<th>First Name:</th>
<th>Last Name:</th>
<th>Middle Initial:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Date of Birth: ____________________________

High School Graduation Date: ____________________________

Home Address: ________________________________________

Primary Phone: ____________________________ Secondary Phone: ____________________________

Email: ________________________________________

**Please send this form to the following college/university:**

Not sure if the institution you’re interested in attending offers a similar program? You can check to see where you may be eligible to receive credit by visiting the [Transfer to Degree Guarantee site](#) and selecting “Entrepreneurship” from the program list (Step 1) and the school district you attended (Step 2).

Name of Institution: ________________________________________

College Department/Office: ________________________________________

Address: ________________________________________

Name of Institution: ________________________________________

College Department/Office: ________________________________________

Address: ________________________________________

Student Signature: ____________________________ Date: ____________________________
PART II: To be completed by a teacher/official from the career-technical education institution.

Entrepreneurship

<table>
<thead>
<tr>
<th>ODE Course</th>
<th>EMIS Code</th>
<th>CTAN</th>
<th>CTAN Name</th>
<th>Credit hours (semester)</th>
<th>Term course completed (Term/Year)</th>
<th>Initial here to indicate that the student has met all requirements to access post-secondary credit*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategic Entrepreneurship</td>
<td>141030</td>
<td>CTENTR001</td>
<td>Introduction to Entrepreneurship</td>
<td>3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*The student must successfully complete the course and earn the required score on the WebXam. Please ensure that the student earned the required score at the time the exam was taken. Students must access the credit within three years of graduation.

<table>
<thead>
<tr>
<th>ODE Course</th>
<th>EMIS Code</th>
<th>CTAN</th>
<th>CTAN Name</th>
<th>Required WebXam Score by Academic Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategic Entrepreneurship</td>
<td>141030</td>
<td>CTENTR001</td>
<td>Introduction to Entrepreneurship</td>
<td>56 or higher</td>
</tr>
</tbody>
</table>

CTAG/CTAN approval may be verified by visiting the Course Reporting System.
Part III: To be completed by an administrator/director from the CTE institution.

Name of institution:  

Address:  

Name of (CT)² Contact Person:  

Title of (CT)² Contact Person:  

Phone:  

Email:  

Signature of (CT)² Contact Person:  

Date:  

Contact Information

If problems arise during the process, contact the appropriate institution representative:
- Higher Education Institution
- Career-Technical Education Institution

Questions about CTAG requirements may be directed to Ohio Articulation and Transfer Network staff at:

Shane DeGarmo  
614.644.6767  
sdegarmo@highered.ohio.gov

Nikki Wearly  
614.728.2662  
nwearly@highered.ohio.gov

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