TEXAS COMMON COURSE NUMBERING SYSTEM AGREEMENT

This is an agreement between the Texas Common Course Numbering System Board, and

_____	_____
Institution	Location

In adopting the Texas Common Course Numbering System, the institution agrees to maintain the System in accordance with the **TEXAS COMMON COURSE NUMBERING SYSTEM GUIDELINES**.

(Print or Type)

_____	_____
Institutional Contact Person	Student Contact Person
_____	_____
Title	Title
_____	_____
Address	Address
_____	_____
City, State, Zip Code	City, State, Zip Code
_____	_____
Telephone Number	Telephone Number
_____	_____
Fax Number	Fax Number

Required Signatures:

_____	_____
President or Designee	Date
_____	_____
Texas Common Course Numbering System Board Chair	Date

Please return form to:

Donetta Goodall, TCCNS Board Chair
Associate Vice President, Academic Programs
Austin Community College
5930 Middle Fiskville Road
Austin, TX 78752
(512) 223-7612 - Fax: (512) 223-7622
Email: goodall@austincc.edu