



Concurrent Enrollment Course Request & Decline Form

Local Education Providers (LEPs) must use this form to initiate the process of receiving Concurrent Enrollment courses and/or programs from a two-year institution of higher education (IHE) with a different service area. Before using this form, it is advised that the LEP confirms which courses the two-year institution in which service area they are located in will not provide. The first section is completed by the LEP & the second section is completed by the IHE.

References: [House Bill 18-1052](#) ; (C.R.S §23-1-109(6)); and [CCHE Service Area Policy](#).

Requesting LEP:

Completed by (Name):

Designated IHE:

Date of Request:

The above defined Local Education Provider (requesting LEP) would like the institution of higher education (designated IHE) in whose geographic service area they are located to offer the following course and/or program of study through a Concurrent Enrollment (CE) Cooperative Agreement beginning (provide term and year here):

Enter course(s) here (include course prefix, number, and title):

If the Designated IHE declines to offer the above courses, with which IHE does the Requesting LEP intend to enter in to a CE Cooperative Agreement?

Names & Email Addresses: Please enter the names and email addresses for the appropriate LEP and IHE representative(s) in the below text box – the LEP should then:

1. **Save** this form; and
2. Email the completed and saved form as an attachment to all email addresses entered below **as well as** to:
 - a. the following CDHE email: studentsuccess@dhe.state.co.us; and
 - b. the Designated IHE president.
3. The Designated IHE will then complete the section on the second page.

CDHE will notify the CE personnel at the Colorado Department of Education and the Colorado Community College System office (if relevant) that the LEP has initiated this process.

LEP Completes This Section

Name & Email of Authorized IHE Representative Completing and Submitting Form:**Designated IHE check one response below:**

AGREE to work with the LEP to offer all courses/programs requested above through a Concurrent Enrollment Cooperative Agreement.

DECLINE to offer ALL the courses/programs offered above and agree to a Concurrent Enrollment exemption for the following time period (minimum 1 year, maximum 5 years):

DECLINE to offer SOME of the courses/programs requested – enter the courses the IHE declines to offer below IN ADDITION to the length of time (within 1-5 years):

Note to Designated IHE: If the Designated IHE does not respond within **45 days** of the Date of Request listed above on this form, they will be deemed as having declined and the requesting LEP may then enter into a Cooperative Agreement with another two-year institution in a different service area for up to two years.

If relevant, reason(s) why the IHE is declining to offer the requested course(s)/program(s) listed on this form (check all that apply):

IHE does not offer the course/program requested.

LEP does not have qualified teachers to instruct college level course in subject area.

Course requested is Remedial/Developmental Education and IHE does not wish to instruct Developmental Education through Concurrent Enrollment.

Other (please explain):

IHE Directions to Email Completed Form:

Once the IHE representative has completed the form:

1. Save the form; and
2. Email the completed and saved form as an attachment to all email addresses entered by the LEP **as well as** to:
 - a. the following CDHE email: studentsuccess@dhe.state.co.us; and
 - b. the Designated IHE president.

CDHE will forward the completed form to the Concurrent Enrollment personnel at the Colorado Department of Education and the Colorado Community College System office (if relevant).