



**Texas Workforce Commission
Dual Credit Healthcare CTE Grant
Letter of Agreement**

Community and Technical College Applicants must complete this Letter of Agreement to validate the Dual Credit partnership with an eligible Texas School District (SD) or Open Enrollment Charter (OEC) School. A signed Letter of Agreement Form is required for each partnership.

Name of College Applicant	
Name and Title of Authorized Representative of the College Applicant	
Name of School District or Open-Enrollment Charter School Partner	
Name and Title of Authorized Representative of the SD/OEC Partner	
List the SD/OEC CTE Program(s) of Study which will include Dual Credit courses that connect to the SOC(s) included in the grant application.	
CTE Program of Study	Dual Credit Course Title(s)
By signing this form, the Applicant and Partner certify that they have read the Application. If a grant is awarded, they agree to comply with the Application, the Program Requirements included, agree to number of students they will serve, and meet the deliverables and timelines as submitted.	
Name of the Authorized SD/OEC Partner Representative	
Signature and Date of Authorized Representative of the SD/OEC Partner	