SJR State Dual Enrollment/Collegiate High School/Early Admissions Registration/Approval Form

***This form must be completed each term/semester**

CLASS LOCATION: SJR State site _____ High School site_____ Year-Term _____

HIGH SCHOOL GRAD YEAR _____ NEW STUDENT _____ RETURNING STUDENT _____

NAME:_____ DATE OF BIRTH: _____ / _____ /_____
Last First Middle

ADDRESS:_____
Mailing Address City State Zip Code

EMAIL: _____

PHONE NUMBER: _____ SCHOOL: _____

I understand that I must have an unweighted 3.0 G.P.A. to participate in the Dual Enrollment Program. In addition, I understand that should I make below a "C" (including a W grade for withdrawing) in <u>any</u> dual enrollment course, I will be <u>permanently dropped</u> from the program.

STUDENT SIGNATURE: _____ DATE: _____

In accordance with Florida law, the Dual Enrollment Program at SJR State is a program of acceleration whereby a high school student earns COLLEGE CREDIT applicable towards an Associates Degree or college credit certificate WHILE AT THE SAME TIME EARNING required high school credit for a high school diploma. Any public school student so enrolled is exempt from the payment of registration, matriculation, lab fees, and instructional materials.

Students must have an <u>overall</u> 3.0 unweighted G.P.A. to participate in the Dual Enrollment Program. Subject area G.P.A.'s will not be considered. Students must provide recent (within 2 year) results of American College Test (ACT), the Scholastic Aptitude Test (SAT), Florida College Entry Level Placement Test (CPT), or the Postsecondary Education Readiness Test (PERT). OFFICIAL TEST SCORES MUST BE ON FILE TO ENROLL IN COLLEGE CREDIT DUAL ENROLLMENT COURSES. Students planning to enroll in English or Math courses must attain a qualifying score.

Overall Unweighted GPA: _____ Counselor's Initials: _____

This student is approved to take the following course(s) for Dual Enrollment and to satisfy the required high school credit. (Please list course title by name as it appears in the College Catalog.)

CRN/Section Number	Credit Hours	D.E. Code	Course Prefix & Number	SJR State Course Title	Times	M	T	W	R	F
Total Hours										

I hereby certify that this student has demonstrated the <u>maturity</u>, <u>motivation</u>, <u>dependability</u> and <u>academic ability</u> to perform satisfactorily at the *College Level*.

X _____ X _____
Signature of High School Counselor Date Signature of Principal or Official Delegate Date

Revised 02/15