



Statement of Approval for Dual Enrollment for Dual Credit Students

Your application to the Dual Enrollment for Dual Credit program will be official only upon receipt of this form, completed and signed by the counselor of your local school, and a completed Application for Admission for Dual Enrollment for Dual Credit.



Student **Legal Name** _____
(please print)

Coastal "A Number" _____ **School Year** _____

Name of High School _____

Student's Grade level **at time of participation:** 10th 11th 12th
☐ ☐ ☐

Technical Program		Participation Year	Location	Effective Terms
		New / Yr 2 / Yr 3		Fall / Spring / Summer
Academic Courses	HS Equivalency/Code	NOTES: Delivery Method / CRN		Effective Terms
				Fall / Spring / Summer
				Fall / Spring / Summer
				Fall / Spring / Summer
				Fall / Spring / Summer
				Fall / Spring / Summer

The student meets the requirements for participation as specified by the college and the LEA. I hereby recommend that this student be admitted to the Dual Enrollment program in the Alabama Community College System.

☐ **This student has an IEP/504 on file and may require ADA Accommodations for their college course(s)**

High School Designee: Signature _____ Date _____

To comply with the requirements of FERPA, this college shall obtain written consent from students before disclosing any personally identifiable information from his/her educational records. As a participant of the Dual Enrollment for Dual Credit program. My signature below authorizes the College to release the information noted in this section:

Student signature acknowledges the following:

- Authorizing release of grade reports and other records to the local high school at the end of each term.
- Acknowledges that, if no courses are listed above, the student accepts counselor recommendation of courses.
- Textbooks and any required materials for the courses are the responsibility of the student.
- A grade of "D" or lower or withdrawal from a course will result in one term of ineligibility, can affect future financial aid status of students and can affect high school credits and GPA.
- I must check my schedule each semester before the start of classes
- High school IEP/504 plans are not honored by postsecondary institutions.
- I am responsible for obtaining any necessary accommodations through the college ADA representative *before* classes begin each term.

Student's Signature _____ Date _____