

## CHECKLIST

**New Students must have the following to enroll as a student in a college class:**

- \_\_\_\_\_ Application
- \_\_\_\_\_ COF Verification
- \_\_\_\_\_ Qualifying ACT or Accuplacer Scores
- \_\_\_\_\_ This Agreement and Registration Form completed with ALL Signatures

**Returning Student must complete this form and have met all course pre-requisites to re-enroll as a Concurrent Enrollment Student.**

### **SECTION C: Part 1 – Student Eligibility: To be completed by High School Counselor/Principal. Check all that apply.**

- \_\_\_\_\_ This student is under 21 years of age.
- \_\_\_\_\_ This student is currently in the \_\_\_\_\_th grade.
- \_\_\_\_\_ This student is continuing 12<sup>th</sup> grade.
- \_\_\_\_\_ This student is eligible to enroll in basic skills coursed (ENG 090, MAT 099) with \_\_\_\_ (12<sup>th</sup> graders only).
- \_\_\_\_\_ The student's Accuplacer scores are attached.
- \_\_\_\_\_ The student's ACT scores are attached.
- \_\_\_\_\_ The student's transcript is attached.

High School Counselor/Principal Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **SECTION C: Part 2 – Course Selection: To be completed by Student and High School Counselor.**

**Attention High School Counselor:** Your initials next to a course verify that the course is included in the Student's ICAP/PEP.

Subject	Course Number	Title	Credit Hours	Counselor Initials
MAT	121	College Algebra (EXAMPLE)	4	ASW

Verify SASID#: \_\_\_\_\_

### **Section D: Part 1 – School District Approval**

**If signed by the Principal and the Superintendent or their designees, the School District agrees to pay the tuition for each course initialed above:**

Approved by Principal (or Designee)

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by Superintendent (or Designee)

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

### **SECTION D: Part 2 – College Approval**

Approved by \_\_\_\_ Administrator

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_