

HIGH SCHOOL/HOME SCHOOL STUDENT

Permission to Enroll

Part A: To be completed and signed <u>each</u> semester by the student's high school counselor, principal or home school teacher.

Last Name Please list the student's curre							
Please list the student's curre			First Name		Middle Initial		
	nt high school co						
		High Sch	ool courses				
Are you planning to finish	an Associate De	gree or Certificate	prior to completi	ng high sc	hool? YFS	or NO	D
					_		' ——
Additional Comments (opt	ional):						
De siente de la contraction						l	
By signing below, I verify to school level and is in good		•	•	requireme	ents for the sop	homore year	at the hi
scribbi level allu is ili godu	academic and t	Dellavioral Stallulli	g at our scrioor.				
Authorized by:				Date:		H	∃igh
School Cou	nselor/Principal	or Home School T	Teacher				
N					1		
Note: In order to take co- providing satisfactory SA						ciency by	
providing satisfactory SA	1, ACT OF VCCS I	Lineigency IDL Au	illission i lacemen	- IVICASUIT	ements .		
The above student has bee	n assessed with	n SAT	ΔCT	or			
		cy IDE Admission 8			ors & seniors).		
	_	_	_		_		
Self Report (Y or N)	GPA	and Algeb	ra IAlg	ebra II or :	>		
Part B: To be completed ar	nd signed each s	semester by a Geri	manna Communit	v College (Counselor		
Semester: FALLS							
The student has been gran	ted permission	to register for the	following course((s):			
	Course(s)				Credits		
_							
			Total Credits A	pproved			
Authorized by:	anna Communi			Date:			