

DUAL ENROLLMENT COURSE REQUEST

Students complete this form with your Parent (s) or Legal Guardian(s), and submit it to your High School Counselor.

Name of High School: _____ Grade: _____

Student's SSN: _____ JSR Student ID: (If known) _____

| Last Name | | | | | First Name | | | | | Full Middle | | | | | Jr.,3rd | | | | |
|-------------------|----------------|----------------|-----------------|-------------|------------|--|--|--|--|-------------|-------|-----------|-------------|--|---------|--|--|--|--|
| Requested Courses | | | | | | | | | | Location | | | | | Term | | | | |
| Class Subject | Catalog Number | Section Number | Class ID Number | Class Title | | | | | | H. S. Site | JSRCC | Fall 20__ | Spring 20__ | | | | | | |
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SIGNATURE OF STUDENT: _____ DATE: _____

HIGH SCHOOL COUNSELOR COMPLETES THIS SECTION

Readiness Standard Met: VPT Compass Asset PSAT SAT ACT SOL

After Readiness Standard is met, depending upon the course, placement test may be required. Placement test may be waived with minimum scores of: SAT - Reading 500, & Writing 500, Math 520 (and must satisfy pre-requisite courses), or ACT—English 21 & Reading 21, Math 22 and (and must satisfy pre-requisite courses).

Please submit official documentation and/or copy of the test scores with this form as appropriate.

This student has the approval of our high school to enroll in Dual Enrollment classes and will receive credit toward high school graduation upon successful completion of each class. This student wishes to take the listed classes at the campus(es) designated above. He or she has met the minimum prerequisites as outlined in the JSRCC College Catalog.

SIGNATURE OF SCHOOL COUNSELOR: _____ DATE: _____

FOR JSRCC OFFICE USE:

App on File: YES NO Residency: IS OS Term Admitted: _____

Readiness Met: YES NO

Placement Test Waived: YES NO