See the following for forms related to enrolling in dual credit courses:

Exhibit A: Request to Enroll in Dual Credit Courses — 2 pages

Exhibit B: Request to Enroll in Other College-Level Courses — 1 page

EXHIBIT A

REQUEST TO ENROLL IN DUAL CREDIT COURSES

A student who wishes to enroll in dual credit courses must return the completed form to the campus principal no later than 30 days prior to the start date of the course(s) in which the student is requesting to enroll.

(Please print.)

Student's name: _____

Home address: _____

City, State, and Zip code: _____

Current grade level: _____ Campus: _____

Will student be enrolling in more than one dual credit course?
☐ Yes   ☐ No

If yes, how many? _____

Name of college or university offering course: _____

Semester: _____   Year: _____

Course(s) in which student wishes to enroll:

_____

_____

District course(s) for which student will seek credit upon successful completion of college-level course:

_____

_____

Student's signature: _____ Date: _____

Parent's signature: _____ Date: _____

College Chief Academic Officer's signature: _____ Date: _____

For office use only:

Does student meet all applicable eligibility and local criteria to enroll in the course(s)? [See EHDD(LOCAL) and (REGULATION)]

☐   Yes   ☐   No

Request:
☐   Approved   ☐   Denied

Principal's signature: _____ Date:_____

EXHIBIT B

REQUEST TO ENROLL IN OTHER COLLEGE-LEVEL COURSES

A student wishing to enroll in a course provided by a college or university that is not in a partnership program with the District must return the completed form to the campus principal no later than 30 days prior to the start date of the course in which the student is requesting to enroll. If the student wishes to enroll in a course at more than one college or university, a separate form for each college or university must be completed.

[See EHDE(EXHIBIT) for a sample request form to enroll in courses through the Texas Virtual School Network (TxVSN)]

(Please print.)

Student's name: _____

Home address: _____

City, State, and Zip code: _____

Current grade level: _____   Campus: _____

Name of college or university offering course: _____

Semester: _____   Year: _____

Course(s) in which student wishes to enroll:

_____

_____

District course(s) for which student will seek credit upon successful completion of college-level course:

_____

_____

Student's signature: _____ Date: _____

Parent's signature: _____ Date: _____

For office use only: ☐ Approved   ☐ Denied

Principal's signature: _____ Date:_____