

West Georgia Technical College Dual Enrollment Student Participation Agreement

This release will remain in effect throughout enrollment as dual enrolled student.

1. Dual Enrollment Requirements (reviewed by student, parent and high school counselor)

The student's individual graduation plan has been updated to reflect the plan of study through dual enrollment.

It is the student's responsibility to inform his/her high school counselor of any scheduling changes in dual enrollment class schedule.

A discussion about dual enrollment with a WGTC high school coordinator has occurred and all questions/concerns have been addressed.

The student will adhere to all policies and procedures of West Georgia Technical College for all courses taken with the college.

The student will be held to any attendance policy set in the course syllabus the student is enrolled in.

If the student drops or fails a dual enrollment class, it is understood that this could negatively impact the student's high school requirements for high school graduation.

The student's final grade in a dual enrollment course will become part of the student's permanent high school transcript.

The student is limited to taking 15 dual enrollment credit hours per term with WGTC. A counselor may not approve more than 15 dual enrollment credit hours total in SURFER during a term.

The student will not be able to register for any dual enrollment classes until the Georgia Student Finance Funding application has been completed by the student. The funding application must be completed before registering each term.

Students may be responsible for additional costs, such as course or lab fee/supplies, and/or fees charged for late or damaged textbooks.

2. Dual Enrollment Release of Information (completed by student)

I, _____, hereby grant permission for West Georgia Technical College to release information of my enrollment and grades, including class schedules and transcripts, to my high school counselor and principal, for the purposes of verifying my high school graduation requirements.

3. Dual Enrollment Participation Signatures

Student name (printed) _____ High School: _____

SSN: _____ Date of Birth: ____/____/____ Phone number: (____) ____-_____

Student signature _____ Date _____

Parent name (printed) _____

Parent signature _____ Date _____

Counselor name (printed) _____

Counselor signature _____ Date _____