Chesapeake College Dual Enrollment Certification Form

Semester: [Fall] [Spring] Year: [20__]

To Be Completed By Student

First Name: ___________________________ Last Name: ___________________________

Social Security #: ______________________ Date of Birth: _________________________

Mailing Address: ______________________

City: __________________ State: _______ Zip: _______

Phone Number: ________________________ Email Address: _______________________

I attend the following type of high school: Public____ Private____ Home School____

Are you a new Dual Enrollment student? Y ______ N ______

High School Name: ________________________ Current Grade: _______ Year of Graduation: _______

Note: Current 10th graders may register for college classes following completion of their sophomore year, if they are 16 years of age or older.

Students: Please complete this form and bring it with you on the day of registration. You will not be registered for classes without a completed form. If you have any questions, call Admissions at 410-822-5400, ext. 2240.

To Be Completed By Counselor:

DUAL ENROLLMENT STUDENTS MUST SUBMIT THIS FORM ON THE DAY OF REGISTRATION!

The CUMULATIVE GPA must be 2.5 or higher.

Student's Cumulative GPA: _______ Chesapeake College will permit eligible students to enroll in courses approved by the counselor or high school authorizer. In the section below, please list any restrictions placed on enrollment. (Please print.)

Dual Enrollment students with a cumulative 3.0 overall high school GPA are eligible to take college English.

Dual Enrollment students who have both a current cumulative GPA of 3.0 and have successfully completed Algebra II with a grade of "C" or better, within the past 3 years, are eligible for direct placement into college-level math and all college courses that require a college ready math prerequisite. A current high school transcript is required for the math exemption.

College-ready students are allowed to take more than 2 courses per semester.

Restrictions: __________________________

School Counselor/Authorizer Signature: __________________________ Phone #: __________________________

Student and Parent/Guardian, please read the following carefully and sign:

By signing this form, this student gives Chesapeake College’s Admissions Office, or other designated college officials, permission to communicate (verbal, written, or electronic) with the high school counselor, high school official and/or parent (or guardian) regarding the student's academic progress, attendance, or other matters that may impact student success.

I understand that Dual Enrollment students are not exempt from standard business office policies and if I drop courses after classes begin I will be billed for fees and a portion or all of my tuition, based on the refund schedule for that semester.

_____YES _____NO I am a FARM student and receive "Free and Reduced Meals."

Student Signature: __________________________ Date: __________________________

Parent/Guardian Signature: __________________________ Date: __________________________

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