



Dual Enrollment Permission Form

PART A: STUDENT INFORMATION

Please indicate semester: (Select Only One) Fall 20_____ Spring 20_____

High School: _____
HS Name *City*

Please Print Your Name and Social Security Number or Student COS Banner ID Clearly:

Name: _____
Last *First* *Middle*

Age: _____ at time of registration Date of Birth: ____/____/____ SSN or Banner ID #: _____

Email: _____ Telephone/Cell: _____

INFORMATION SHARING CONSENT: I hereby agree to allow the College of the Sequoias to share admissions, registration and grade information with my high school.

CONSENT to COS MANUAL REGISTRATION: In the event that I am unable to register myself through Banner Web, I **authorize** College of the Sequoias Registration Office to manually register me into my agreed course program(s) reflected on this **permission form**.

Student's Signature

Date

PART B: HIGH SCHOOL PERMISSION

The High School confirms that they have reviewed this student's academic record and have determined that they meet all eligibility requirements prescribed by the college. In addition, the High School confirms that this student demonstrates adequate preparation to enroll in college-level work.

List of Approved College Courses:
(Use Course Title, ex., English 1)

➤ **Is this a CCAP-Student:** YES NO

High School Official Signature

Date

Title of the High School Designee

Phone

PART C: PARENTAL/LEGAL GUARDIAN PERMISSION

➤ Students that will be 18 at the time of registration do not need to complete this form.

This consent also serves as an acknowledgement of the following:

- Your child will be enrolling in college-level course(s), in which the grade(s) received will be a part of the student’s permanent college record.
- Students participating in Dual enrollment must make satisfactory academic progress (minimum cumulative GPA of 2.0 and completion of 67% of courses attempted) to maintain eligibility for financial aid when they begin college as a post-graduate student (after high school graduation).
- Your child is capable of handling the rigor of college-level work and the responsibilities of being a college student.
- Your child may be in a classroom setting with non-high school students.
- In accordance to Education Code (EC) 49061, students under the age of 18 that enrolled in a college course must grant permission to release education records to parents and legal guardians.

_____	_____	_____
Parent/Legal Guardian Signature	Date	Contact # (optional)

PART D: STUDENT PERMISSION

In accordance to EC 49061, students under the age of 18 that enrolled in a college course must grant permission to release education records to parents and legal guardians.

- I decline to release my information.
- I will release my education records to **(Parent/legal guardian’s name):** _____

I acknowledge that if I **decline** to release my information, my parents and guardians will not have access to my student records. By **granting access**, I hereby give consent to my parents, legal guardian or any other third party mentioned above to have access to my education record. I understand that the individual will need to present a valid photo ID to release or discuss matters related to my education record.

To make any modifications to this consent, I must notify the Admissions and Records in writing or in person. I understand that this consent is only valid for one semester.

_____	_____
Student’s Handwritten Signature	Date

College of the Sequoias Admissions Office USE ONLY

Fall or Spring <i>provide year</i>	Course Title (example) English 1	CRN 5-digit # (Example) 12561	Units	Processed Date & Staff Initials: