

(Please Print) (Last) ast 4 digits of Social Security #:	(First)	(Middle) DOB:
_	n (To be completed by the High sold the student above to be admit	School Counselor or Principal) tted in the Dual Enrollment Program at Pearl River
High School:		
Course(s):	High School Campus O	online ☐ PRCC Campus ☐ Fall ☐ Spring ☐ Summer
	High School Campus O	nline ☐ PRCC Campus ┃ ☐ Fall ☐ Spring ☐ Summer
High school grade point average High school Carnegie/Core unine ACT Score: English sub-score(Mining the Mining School of the Mini		0 on a 4.0 scale)
Counselor/Principal Signature	:	Date:
that are creditable toward course(s) you should take. We must abide by guidelin We must cooperate with b We understand that any corecord. At the end of the s We understand it is the sturn or withdraw from a Dual Er We agree to fees and othe Student agrees for parent/only. We agree that the information submits	e selection for enrollment will be authe high school diploma. Consult we so of the Dual Enrollment Program, oth the high school and the College ourses registered for, or grades receivementer, we authorize PRCC to forwardent's responsibility to receive appropriate to the service of the course materials required by Pear guardian to have access to all studented on this form is true to the best of our test of the service of th	eived, become a permanent part of the student's college ward grades to the high school. Iroval from the high school counselor for permission to dro
Dual Enrollment Student's Signa	ature:	Phone #:
ignature of Parent (Guardian):		Date of Birth:

Submit paperwork back to your High School Counselor for processing. Your next step is to complete the **Dual Enrollment Application for Admissions** by visiting the PRCC Dual Enrollment website at http://prcc.edu/admissions/dual-enrollment.