Prince George’s County Public Schools Dual Enrollment Form

Name

PGCPS Student ID Number

High School

Grade in School

Counselor’s Name

Academic Semester (Fall, Spring, Summer)

Year

Cumulative GPA

☐ I am aware that I must meet college requirements for dual enrollment before I am admitted to the college. Additionally, I agree to allow the college or university to share information regarding my academic record with Prince George's County Public Schools (PGCPS) until I graduate or am no longer a registered PGCPS student.

☐ I am aware that I must provide my own transportation.

☐ I understand that while a dual credit student, I am to abide by both the PGCPS and the college or university student codes of conduct.

☐ I understand that I am responsible for paying the cost of textbooks and applicable fees. Students who receive free and reduced meals (FARMS) will have textbooks and fees paid by PGCPS.

☐ I am aware that if my child withdraws (W) or fails a dual enrollment course with an F (college/university) or E (PGCPS), I may be required to pay 90% of tuition paid by PGCPS. I further understand that my child will NOT be able to take another dual enrollment course paid by PGCPS. ___________________ (Parent/Guardian Initials)

Student Signature

Date

Parent/Guardian Signature

Date

☐ The above student is certified to be at least 16 years old on the first day of the college class, a registered PGCPS student, and has a cumulative grade point average of at least a 2.5.

Approved Class(es)

Counselor’s Signature

Principal’s Signature

Date

Date