LEE COLLEGE

DUAL ENROLLMENT REQUEST FORM

PLEASE USE ONLY BLUE OR BLACK INK

Academic Year: Last Name :(Please print) Lee College ID or SSN:		Graduation \	ear:		
		First Name:_	High School:Phone Number:		
		Date of Birth			
FALL			SPRING		
Course Registration Number, ex. REG #	Course #, ex. MATH 1314	Course Title, ex. College Algebra	Course Registration Number, ex. REG #	Course #, ex. MATH 1314	Course Title, ex. College Algebra
coordination with s course selection for must be met. We a both the high schoo for, or grades earned we authorize the point a part of this a representative for pay all tuition, fees McNair Center, and school students wh Students. We, the	tated high school areach term. We upgree to abide by I and postsecondared, become a perpostsecondary institute agreement. We uppermission to drops, and book cost if I the Lee College of are enrolled in student and parer We understand to	and postsecondary institunderstand that all presente the high school and posity institution in fulfilling manent part of the studitution to send all grades anderstand that it is the por resign from the country from the country from the country and provided by our high Education Center-South the Dual Enrollment Pront/guardian, certify that	ution. We understand equisite requirements tsecondary policies a student responsibilitient's high school and to the postsecondary student's responsibilities(s) listed above. If school, College couliberty County may gram are integrated all the information f	If the high school rest, including assessing codes of conductes. We understand college record. Any school, including lity to receive approximate approximate the course taught on the betaught in mixed in course with maurnished in this approximate assessing the course with maurished in this approximate assessing to the course with materials and the course with t	collment Program offered in epresentative will authorize ment and course placement act. We will cooperate with that any courses registered to the end of each semester, at those for courses that are proval from the high school at it is our responsibility to be Lee College Main Campus, and student class where high hinstream adult Lee College plication is true to the best neediate cancellation of the
Student Signature		Date	Parent Signature	(if student is under 18	years) Date
High School Representat	ive Signature	Date	High School Repre	sentative Name (print/	(type)

For more information or questions regarding the Dual Enrollment Program, please contact the Dual Enrollment Office at 281-425-6295.