



## DUAL ENROLLMENT PROGRAM STUDENT PROCEDURES

The following steps must be followed to participate in the DE Program:

- \_\_\_1. **Attend** a Parent/Student Information Meeting and participate in an Advisement Session with the DE Coordinator.
- \_\_\_2. **Complete** the **Advisement/Contact Information Form** and **GCPS Permission Form**.
- \_\_\_3. **Complete** the DE Student Participation/Funding Form. This form must accompany the student's college application and transcript.
- \_\_\_4. **Apply** and gain acceptance to the college/university of your choice. You are responsible for following the college's application procedures and meeting all deadlines.
- \_\_\_5. After receiving your college acceptance, notify your high school DE Coordinator. It is your responsibility to know which courses you still need to complete for graduation. **Set up an appointment with your counselor to review your credits.**
- \_\_\_6. **Meet** with your college advisor to set your college schedule.
- \_\_\_7. **Meet** with your high school counselor to review your college schedule and to complete your Senior Application for Graduation (if appropriate).
- \_\_\_8. **Complete** Part I of the on-line DE Funding/Student Participation Agreement application. Email your high school DE coordinator when you have finished this step.
- \_\_\_9. At the end of the semester, **provide an official copy of your college transcript** to your high school DE coordinator.

*NOTE:* Steps 6-9 must be completed for each semester (fall, spring and summer). An official copy of your 2<sup>nd</sup> semester college schedule can be emailed to your high school DE coordinator instead of scheduling a face to face meeting.

**DE STUDENTS ARE RESPONSIBLE FOR COMPLETING ALL HIGH SCHOOL GRADUATION REQUIREMENTS IN ORDER TO PARTICIPATE IN THE GRADUATION CEREMONY.**



# GCPS DUAL ENROLLMENT PERMISSION FORM

Student's Name: \_\_\_\_\_ Student Number: \_\_\_\_\_

High School: \_\_\_\_\_

Seeking Admission to (Name of College/University) \_\_\_\_\_

DE Program [Select One] Full-time \_\_\_\_\_ or Part-time \_\_\_\_\_

Student's Daytime Phone Number: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Daytime Phone Number: \_\_\_\_\_

**Tuition, mandatory fees and books are the only costs that DE funding covers. All other expenses will be the responsibility of the student and parent/guardian.**

My signature on this form indicates parental approval for my student to participate in the DE Program. I understand and agree to the following guidelines regarding the **DE** Program:

- Upon graduation, students may not continue to take courses through DE.
- If my student fails to pass the courses required for high school graduation, he/she will not be permitted to participate in the graduation ceremony.
- The college will not communicate with the parent or high school if a problem arises. The college will only communicate with the student. Therefore it is the student's responsibility to communicate dropped courses and grades to the DE coordinator.
- **DE** credits may not transfer to another college. It is the student's responsibility to check.
- **DE** students must continue to meet GHSA high school eligibility requirements to participate in competitive activities.
- In the event withdrawal from a course is necessary, the student is responsible for communicating the withdrawal to the counselor. Every effort will be made to place student in the high school equivalent course. In some cases, this will not be possible which might impact the student's graduation date.
- Dual Enrollment students must take any testing mandated by the state of GA and GCPS. The student is responsible for making the testing arrangements with the high school.
- Students must comply with all rules from the post-secondary institution and the high school.
- Communication of post-secondary grades to the high school in a timely fashion is the student's responsibility.
- Dual Enrollment students are responsible for completing all necessary required paperwork.
- Dual Enrollment students must complete the On-Line Funding/Student Participation Agreement application located on GaFutures.org for each semester of participation. Failure to do so in a timely manner could result in the student being dropped from their college classes.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Counselor Signature \_\_\_\_\_ counselor will sign later \_\_\_\_\_ Date \_\_\_\_\_

By typing your name above you agree with the rules/deadlines set forth in this document



# Georgia Milestones

(End Of Course Assessment)

## GEORGIA TEST REQUIREMENTS

Student's Name: \_\_\_\_\_

**College Courses Requiring Milestones**

**Year/Semester Taken**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

American Lit

Taking Amer Lit in college is very rare but still need to include this page in the application.

I understand the following information about MILESTONE requirements:

I must take the MILESTONE for the above course/courses at my high school in order to receive high school credit.

My score on the end of course assessment will count 20% of my high school course grade.

If I do not take the test or do not provide the college grade to my DE Coordinator, I will receive a grade of "NT" and will not receive credit for the course. This will prevent me from graduating.

The MILESTONE assessment tests high school curriculum. College curriculum will vary from high school curriculum and students are held accountable for knowledge of the high school curriculum on the Milestone.

It is my responsibility to communicate with the high school DE coordinator to find out when/where/what time the MILESTONE will be given and to report on time for the test.

Student Signature: \_\_\_\_\_ Date \_\_\_\_\_

Counselor Signature: \_\_\_\_\_ counselor will sign later Date \_\_\_\_\_

Office Use Only:

Student: \_\_\_\_\_ ID#: \_\_\_\_\_ College: \_\_\_\_\_

Fall / Spring / Summer



## ADVISEMENT / CONTACT INFORMATION DUAL ENROLLMENT PROGRAM

### Student Information

Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_

GCPS Student Number: \_\_\_\_\_ College: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

### Parent/Guardian Information

Parent(s) Name(s): \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Father \_\_\_\_\_ Mother

Work Phone Number: \_\_\_\_\_ Father \_\_\_\_\_ Mother

Cell Phone Number: \_\_\_\_\_ Father \_\_\_\_\_ Mother

E-Mail Address: \_\_\_\_\_ Father \_\_\_\_\_ Mother

### Advisement Acknowledgement

I have participated in an advisement session regarding the DE Program at my student's high school. I understand the procedures and my responsibilities if I choose to participate in the program.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By typing your name above you agree with  
the rules/deadlines set forth in this  
document

**Save file as: Last name, first initial DE APP  
ex. King, A DE APP**