



Welcome to State! We are so happy to have you participate in our early enrollment program. Please review this form carefully and sign below. This confirms that you understand and agree to the terms of the program and any missing signatures will result in not being registered for course(s) or enrollment within the program.

**Date:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_ **MI:** \_\_\_\_\_

**Birthday:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**High School and County:** \_\_\_\_\_

**Student Responsibilities:** I understand that I am choosing to complete college-level courses. I recognize that these courses will be more rigorous and contain mature content/materials. College courses may include students from different high schools and backgrounds. I must follow all applicable high school and college policies. I must access my college accounts, e-mail, and MyState account. I must meet attendance requirements and course requirements. I understand that attendance and my grades will be shared with my high school. The grades I earn throughout my participation in this program will be part of my permanent college transcript and may impact future financial aid eligibility. These courses can also be added to the high school gpa contributing to my high school graduation rank and status. It is my responsibility to contact the counselor, college staff, and academic educational outreach office for support and assistance throughout the program. I understand that I must monitor my academic progress and consult with my high school counselor, instructor of the course, and academic educational outreach office staff to withdraw or make changes to my schedule. I understand that I will be responsible for all charges accrued by registering and failure to pay the balance in full will result in not being able to register for future courses and receive my transcripts. I must complete all documentation by the appropriate date to be considered for the program. By signing this, I read and agree to the terms and conditions.

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

**Parent and Legal Guardian Consent:** I grant permission for this student to enroll within the Early Enrollment/Dual Credit program at West Virginia State University. I understand that there are expectations of student behavior and rigor that is more complex and mature than that of a high school course or content. I understand that any balance incurred throughout the program is the student or parent/legal guardian's responsibility. I understand that WVSU faculty or staff may be limited in the information that they can share with me due to certain laws, The Family Education Rights and Privacy Act (FERPA) is a federal law that protects ANY student records, minor or adult. My student must sign a FERPA wavier to allow WVSU to discuss specifics concerning my student with me. West Virginia State University is an accredited institution and has transfer agreements with other institutions of higher education, but the student is responsible for consulting with the college of their choice about the specific transfer policies. I have read and agree to the terms and conditions.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**High School Consent:** The student listed above has met the requirements and is authorized to participate in the early enrollment/dual credit program with West Virginia State University. The student and parental guardian have been notified of any additional requirements needed by the school.

**Principal/Authorized School Designee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_