

**Dual Enrollment Parental Consent Form
Barrow County Schools**

The **Dual Enrollment (DE)** program allows high school students to enroll in a college class and earn both high school and college credit. There is no cost to the student for tuition, mandatory fees or textbooks.

Student's Name: _____ School ID#: _____ Current Grade: ____ Age: ____

Name of College: _____ Area of Interest: _____

I plan to attend (circle **ONE**): Winter-Spring/Jan. **YEAR** Summer/June **YEAR** Fall/August **YEAR**

Social Security #: _____ Date of Birth (MM/DD/YYYY): _____
(REQUIRED)

Address: _____
City State Zip Code

Phone #: _____ Email: _____

Parent Name: _____ Emergency Contact Phone #: _____

I consent to pursuing enrollment of the above student into **DE** program. I understand that my child will receive course credit from both Barrow County Schools and the college he/she will attend. Students may attend any college for **DE**. Most Barrow County's high school students attend **Lanier Technical College/Winder Campus**.

Transportation: This course is taught off-campus and transportation is not available. I understand that it is my responsibility and my child's responsibility to secure appropriate transportation to and from the college he/she will attend for **DE**. Appropriate transportation may entail my child driving to the college or arranging to be driven to the college by a responsible party. I release and hold harmless the school district, staff, and college from all liability resulting from any and all accidents or injuries which may occur during transportation. Some limited transportation **may** be available to students who enroll at Lanier Technical College (**only at the Winder Campus**).

Testing: Students must make acceptable scores on the admissions exam required by the college of their choice. Admissions exams such as the ACT and SAT have an associated fee. The Accuplacer Exam may be required for technical college admission and is **FREE** of charge. More information about testing will be available upon the return of this form.

Confidential Information: I give consent for the high school **DE** coordinators to access the above student's test scores, grades and records in regards to the application process and participation in the **DE** program.

Signature indicates acknowledgement to all of the above items.

Parent's/Guardian's Signature: _____ Date: _____

Student's Signature: _____ Date: _____

Return completed form to Career Center Coordinator or Dual Enrollment Coordinator

Questions? Comments? Need more information? Parents may contact:

AHS: Allison.Sharp@barrow.k21.ga.us **WBHS:** Liz.Long@barrow.k12.ga.us **Sims/BASA:**
Sherri.Perry@barrow.k12.ga.us