Reynolds COMMUNITY COLLEGE — DUAL ENROLLMENT COURSE REQUEST

Students complete this form with your Parent (s) or Legal Guardian(s), and submit it to your High School Counselor.

Name of High School: _____ **Grade:** _____

Student's SSN: _____ **JSR Student ID:** **(If known)** _____

Last Name	First Name	Full Middle	Jr.,3rd

Requested Courses					Location		Term	
Class Subject	Catalog Number	Section Number	Class ID Number	Class Title	H. S. Site	JSRCC	Fall 20___	Spring 20___

SIGNATURE OF STUDENT: _____ **DATE:** _____

HIGH SCHOOL COUNSELOR COMPLETES THIS SECTION

Readiness Standard Met: ❑ VPT ❑ Compass ❑ Asset ❑ PSAT ❑ SAT ❑ ACT ❑ SOL .

After Readiness Standard is met, depending upon the course, placement test may be required. Placement test may be waived with minimum scores of: SAT - Reading/Writing 480, Math 530 (and must satisfy pre-requisite courses), or ACT—English 18 & Reading 18, Math 22 and (and must satisfy pre-requisite courses). PSAT—Reading/Writing 390, Math 500

Please submit official documentation and/or copy of the test scores with this form as appropriate.

This student has the approval of our high school to enroll in Dual Enrollment classes and will receive credit toward high school graduation upon successful completion of each class. This student wishes to take the listed classes at the campus(es) designated above. He or she has met the minimum prerequisites as outlined in the JSRCC College Catalog.

SIGNATURE OF SCHOOL COUNSELOR: _____ **DATE:** _____

FOR JSRCC OFFICE USE:

App on File: ❑ YES ❑ NO Residency: ❑ IS ❑ OS Term Admitted: _____

Readiness Met: ❑ YES ❑ NO

Placement Test Waived: ❑ YES ❑ NO