

Concurrent/Dual Credit Class Registration and Parent Consent Form

STOP: Please complete the online Allen application before typing in your information below, printing for signatures and submitting this form.

Legal Last Name		Legal First Name	Middle Initial	Birthdate		
Social Security Number		Allen ID Number	Name of High School	Graduation Date (MM/Y	Graduation Date (MM/YY)	
Student Ema	il Address		Counselor Email Address			
			REGISTRATION			
Semester and	year of registrat	ion: Fall Spring	Year:			
Course Number	Section	High School Class Code (If applicable)	Course	Name	Credit Hours	
limited to grade once appropria	es, registration, ite identification	academic standing, payment in	y educational, academic, and student final formation, and collections. Verbal access ted or photocopied materials will not be pr lity Support records.	only will be granted to the following indivi	dual(s)	
Student Name			I	Date		
		Print	Sign			
I have reviewe Expe Clas Aller All b Payr Payr If str	ectations of studes subject mattern is accredited a ut transfer policibiling is the students are processent must be madents are without frefund deadling subjects.	In and I'm aware that for my chillent behavior and performance of the complex and matured has transfer agreements with each of the complex and parent's and parent'legal guardian' assed through student's online for the complex and payment plans from class(es) by the 100 ne, refunds will follow the perceivers and performance.	are held to a higher standard than in high ure in nature than high school class conter h other colleges. Students are responsible	nt. e for consulting with other college instituti or mailing payment to the business office esed for paid amounts only. If students with) .	
Parent/Guardian Name			1	Date		
Principal/Coun	selor Name	Print Print	Sign / Sign	Date		

Please scan and email registration form to wheeler@allencc.edu