

## OFFICE OF ADMISSIONS

# DUAL ENROLLMENT: PARENT/GUARDIAN AGREEMENT FORM



Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_  
High School: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Anticipated Graduation Year: \_\_\_\_\_

### PARENT/GUARDIAN PERMISSION AGREEMENT

- > I understand that by allowing my student to participate in the Dual Enrollment program, I will be responsible for following the guidelines and academic calendar of not only the high school, but also of the college.
- > I hereby give my permission for my student, \_\_\_\_\_, to take Dual Enrolled courses provided by Midlands Technical College.
- > I will be responsible for any tuition and fees associated with courses taken on Midlands Technical College Campuses
- > I understand that my student will be registered based on the information available to the College counselor at the time of registration and that the student and his/her school counselor are responsible for approving the courses my student enrolls in.
- > I understand that it is our responsibility to determine the transferability of individual courses to colleges other than those in the South Carolina Technical College system.

\_\_\_\_\_  
Parent or Legal Guardian

\_\_\_\_\_  
Date