



Central Virginia Community College
3506 Wards Road
Lynchburg, Virginia 24502
Department: Dual Enrollment
434 832 7832
dualenrollment@centralvirginia.edu

Dual Enrollment Parent Permission Form

* = Required field

Student Information

- * Student ID Number _____
- * First Name _____
- * Last Name _____

Student and Parent/Legal Guardian (PLEASE SIGN):

I give permission for my child to enroll in Central Virginia Community College (CVCC) dual enrollment course(s).

If the above referenced student was under the age of 18 at the time he/she completed the Virginia Community College System (VCCS) Application for Admission, I certify under penalty of disciplinary action that all of the information is complete and accurate. I agree to supply the college with supporting documentation related to my application, if I am requested to do so.

* Parent Signature: _____ Date: _____

By signing below, I acknowledge that I understand CVCC policies and expectation of dual enrollment students.

* Student Signature: _____ Date: _____

For Office Use Only

Service Indicator Removed:

Initials: _____

Date: _____

Return to Dual Enrollment Office

Jefferson Forest High School, 1 Cavalier Circle, Forest, Va 24551
DUAL ENROLLMENT AGREEMENT

By deciding to dual enroll, I understand that **(student and parent please read and initial each item):**

1. Dual enrollment classes are governed by CVCC's policies, including, but not limited to, attendance, grading, calendar, drop/add periods and privacy laws (FERPA laws do not allow CVCC to share student information with parent(s), regardless of the student's age). _____ - _____
2. It is my responsibility to enroll at CVCC (first come, first serve!), at my own expense. _____ - _____
3. Grades I earn through CVCC become a part of my permanent college transcript. _____ - _____
4. I hereby authorize CVCC to send a transcript to JFHS promptly at the end of each semester. It is my responsibility to ensure that CVCC sends JFHS a transcript at the end of each semester. _____ - _____
5. I will receive weighted credit at JFHS for every two CVCC 3 credit hour CORE courses, and I will receive non-weighted high school credit for elective courses. _____ - _____
6. I must take two semesters of a sequential class at CVCC (6 credit hours) to earn one high school credit. If I fail either of the sequential classes, I will not receive high school credit and it may delay my JFHS graduation date. _____ - _____
7. According to the VHSL, I must remain enrolled and pass the equivalent of 5 high school credits per semester to remain eligible as an athlete. _____ - _____
8. If I drop a CVCC course after the JFHS drop/add period, I may not be able to enroll in another class at JFHS (please note VHSL eligibility above). If I drop a CVCC class after it has begun, according to CVCC policy I will receive a grade of "W" or "F" on my CVCC transcript and a corresponding "WP" or "WF" on my JFHS transcript. _____ - _____
9. I understand that if I earn a final grade in the first semester below a C in a class required for graduation, that JFHS will enroll me back at JFHS for the second semester to complete that class at the high school. _____ - _____
10. It is my responsibility to keep up with all school-related activities and information. _____ - _____
11. I hereby authorize JFHS to send an unofficial transcript to CVCC for documentation of my GPA and proper placement into college-level courses. _____ - _____
12. I understand that I am required to submit proof of enrollment within the first 2 weeks of the school year. _____ - _____
13. I understand that I am required to submit an official transcript from the college to JFHS within 2 weeks of finishing the course(s) in order to receive high school credit for the course(s) I have completed. _____ - _____
14. I understand that if I choose to drop or withdraw from my dual enrolled course(s) after 15 school days from the start of the class at JF, I am responsible for the tuition payment of 3 credit hours. _____ - _____

I hereby authorize Jefferson Forest High School access to any enrollment and/or academic information from CVCC professors, counselors and related personnel.

 Student Signature Date

 Parent Signature Date

 JFHS Counselor Signature Date

 JFHS Principal Signature Date