

# DUAL ENROLLMENT ARTICULATION/AUTHORIZATION

## PENSACOLA CHRISTIAN COLLEGE®

Completed form must be submitted each semester prior to registering. Print all information in pen.

Student's Name: \_\_\_\_\_

PCC ID: \_\_\_\_\_

High School: \_\_\_\_\_

HS GPA: \_\_\_\_\_

HS Graduation Date: \_\_\_\_\_

Authorization requested for (select one):  Fall 20\_\_  Spring 20\_\_  Summer 20\_\_

Completed by Student			Completed by High School		
Course Number	Course Name	College Credit Hours	Eligible for HS Credit?	HS Subject Area Equivalency	HS Credits to Be Awarded
			<input type="checkbox"/> Yes		<input type="checkbox"/> 1.0 / <input type="checkbox"/> 0.5 / <input type="checkbox"/> None
			<input type="checkbox"/> Yes		<input type="checkbox"/> 1.0 / <input type="checkbox"/> 0.5 / <input type="checkbox"/> None

This student has earned at least **12 high school credits**, has a **3.0 cumulative high school GPA** or higher, and **has my permission** to take the online courses listed above from Pensacola Christian College.

\_\_\_\_\_  
School Official's Printed Name

\_\_\_\_\_  
School Official's Signature

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Date

I authorize Pensacola Christian College (PCC) to release my academic information to the high school listed above and/or my parents/guardians as needed while attending PCC as a Dual Enrollment student. This permission only applies while I am a Dual Enrollment student and/or when finalizing my high school academic records. I also understand that:

1. To withdraw from a course, I must get permission from my high school and notify PCC in writing. I am entitled to a full refund of tuition for classes dropped prior to the start of the term. Once the term begins, I am obligated for tuition charges whether or not I complete course requirements.
2. All grades, including *W* for withdrawal, become part of my permanent college transcript. A copy of this transcript will be sent to my high school at the end of this term.
3. If I plan to transfer credits to another institution, it is my responsibility to confirm whether courses meet the institutional and specific degree requirements of the transfer institution.

\_\_\_\_\_  
Student's Printed Name

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date