Dual Enrollment
Signature Page
(Summer 2023 Semester ONLY)

Jefferson State Community College
Dual Enrollment

Name: _____ Date of Birth: _____
Last First Middle

High School Name: _____ Grade Level for Enrollment Term(s): _____

Initial next to each statement to indicate that you have read and understand the information presented. (INITIALS REQUIRED: Form will not be processed with X or ✓.)

- This is a college course. Materials and coursework will be at the college level. _____ **(student initials)**
- If I make a C or D or if I withdraw from a course after the drop/add period
  - I must sit out one academic semester (not to include summer). _____ **(student initials)**
  - I may receive no college or high school credit for the course. _____ **(student initials)**
  - It can affect my ability to receive Federal Financial Aid in the future. _____ **(student initials)**
- The grades earned in college courses will remain on my permanent college transcript. _____ **(student initials)**
- If I have a disability and require accommodations, I must file the appropriate documentation with the ADA Accommodations office before accommodations can be made. _____ **(student initials)**

SUMMER 20_____

Course Name & Number	***Campus** (See campus codes below)	**Term Length** (**FT** = Full Term **SS1** = 1st 8-week session **SS2** = 2nd 8-week session)	**Instructor** (Optional)	****CRN** (Required for classes on a JSCC campus)	****Class Time** (Required for classes on a JSCC campus)
Ex. ENG 101	***JC***	***FT***		***37502***	***MW 8:30 – 9:15***

***Campus Codes:** ONL = Online JC = Jefferson Campus on Carson Rd. SH = Shelby-Hoover Campus
HS = High School PC = St. Clair-Pell City Campus CC = Chilton-Clanton Campus

The **CRNs (the 5-digit course registration number) and **class times** can be found on the class schedule. Go to www.jeffersonstate.edu and select "Class Schedule" at the top of the homepage under the search box.

As a participant in the Dual Enrollment for Dual Credit program, I understand that it is the responsibility of Jefferson State Community College to release my academic information to my high school and/or secondary educational entity. In signing this form, I authorize the College to release the information noted in this section.

_____ _____
Student Signature Date

The signature below indicates this student meets the enrollment criteria and is approved by their high school for admittance into the Dual Enrollment for Dual Credit program at Jefferson State Community College and registration into the classes listed. **Approval from secondary school officials indicates that the student has demonstrated both academic readiness and social maturity.**

_____ _____
Counselor or School Administrator Signature Date