PUBLIC SCHOOL OFFICIAL'S PERMISSION FORM

(Required of all high school students enrolling for credit)
(Juniors and Seniors Only May Participate)

	ions & Records Office est Virginia Community College SVCC	FROM:	High School
	ds, Virginia 24641		
Student Name:		SS#:	·
Term (check one):	Spring Year:	···
Course 1:	Subject: Catalog #: High school official must check thigh school for this course. If this bottor this course.* Student has permission to take classes.	x is not checked the student	credit is being awarded by the must pay for 100% of the tuition
Course 2:	Subject: Catalog #: High school official must check thigh school for this course. If this bottor this course.* Student has permission to take classes.	his box if Dual Enrollment of a student is not checked the student	must pay for 100% of the tuition
Course 3:	Subject: Catalog #: High school official must check thigh school for this course. If this bot for this course.* Student has permission to take classes.	his box if Dual Enrollment of is not checked the student	credit is being awarded by the must pay for 100% of the tuition
Course 4:	Subject: Catalog #: High school official must check thigh school for this course. If this bottor this course.* Student has permission to take classes.	his box if Dual Enrollment of a student of the student	credit is being awarded by the must pay for 100% of the tuition
additional course	that the student listed above is currentle work is not expected to cause the studeurse(s) listed above.	y making satisfactory grades ent any academic difficulty.	s in high school and this This student has our permission
Signature of Hig	h School Official	Date	<u> </u>
Title			
*If Dual Enrollm college for the to student.	ent credit is checked, the high school is tal amount of tuition due. The high sch	s agreeing to receive an invo nool may collect a portion of	oice and submit payment to the fthe tuition payment from the
OFFICE USE Copy to VP of Copy to Busine	Instruction: Date:	To have grades for sent to your school	
<u> </u>		Student Signature	Date

2 Ply Original: SVCC Admissions/Records Office Copy: High School Principal/Counselor