



FALL 2021 Dual Enrollment Recommendation Form

Pearl River Community College

dualenrollment@prcc.edu

601-403-1419

Full Legal Name _____
(Please Print) (Last) (First) (Middle)

Home Address _____
(City) (State) (Zip code)

Phone #: _____ Social Security #: _____ Date of Birth: _____

Student/Parent Terms and Conditions

- We understand that course selection for enrollment will be authorized each term by the high school counselor for courses that are creditable toward the high school diploma. Consult with your high school counselor for advisement for which course(s) you should take.
- We must abide by guidelines of the Dual Enrollment Program, as well as PRCC college policies and procedures.
- We must cooperate with both the high school and the College in fulfilling responsibilities.
- We understand that any courses registered for, or grades received, become a permanent part of the student's college record. At the end of the semester, we authorize PRCC to forward grades to the high school.
- We understand it is the student's responsibility to receive approval from the high school counselor for permission to drop or withdraw from a Dual Enrollment course. Tuition is not refunded or prorated for withdrawals.
- We agree to fees and other course materials required by Pearl River Community College for credit.
- Student agrees for parent/guardian to have access to all student records/information at PRCC for the dual enrollment term only.

We agree that the information submitted on this form is true to the best of our knowledge and we understand that any misrepresentation of facts may result in the immediate cancellation of the student's application or registration. We also agree to the Student/Parent Terms & Conditions listed above.

Dual Enrollment Student's Signature: _____

Signature of Parent (Guardian): _____ Parent Date of Birth: _____

Submit paperwork back to your High School Counselor for processing.

*Student: Your next step is to complete the **Dual Enrollment Application for Admissions**. Visit the PRCC Dual Enrollment website at <http://prcc.edu/admissions> to apply by **June 1, 2021**.*

Name: _____

High School Recommendation (To be completed by the High School Counselor or Principal)

It is my pleasure to recommend the student above to be admitted in the **Dual Enrollment Program** at Pearl River Community College. I certify the student has met all eligibility requirements for dual enrollment as set forth by the state of Mississippi.

High School: _____

Course Requests:

To view course options, go to www.prcc.edu/Academics and click on Class Schedules.

ONLINE:

Course Name: _____

Course Name: _____

Course Name: _____

High School Campus:

Course Name: _____

Course Name: _____

Course Name: _____

PRCC Campus: Poplarville Hattiesburg Waveland (Circle One)

Course Name: _____ CRN: _____

Course Name: _____ CRN: _____

Course Name: _____ CRN: _____

Requirements needing certification from high school counselor or principal:

Student Classification: _____

High school grade point average (GPA) _____ (Minimum of 3.0 on a 4.0 scale for Academic; 2.0 for Career Technical)

High school Carnegie/Core units completed _____ (Minimum of 14 units)

ACT Score:

Composite Score _____

English sub-score _____ (Minimum of 17 English ACT sub score in order to take ENG 1113-English Composition I)

Math sub-score _____ (Minimum of 19 Mathematics ACT sub score in order to take MAT 1313-College Algebra.)

Counselor/Principal Signature: _____ **Date:** _____

*Counselor: For Fall 2021 Enrollment, forward this completed form along with student ACT scores and transcript to the Office of Dual Enrollment for processing no later than **June 1, 2021**.*