

Permission to Register Form

All areas must be completed legibly!

Student Name: _____

TCC Student ID Number: _____ Student Phone Number: _____

Name of High School: _____ Graduation Date: _____ (mo/yr)

Semester (circle one): Fall (main) Spring (main) Summer (B- June Exp.) _____ (year)

TCC Course Section Number	TCC Course ID	TCC Course Title	Class Location (circle one)	Number of high school credits student will earn	High school academic area course satisfies
			HS/Online/TCC		
			HS/Online/TCC		
			HS/Online/TCC		
			HS/Online/TCC		
			HS/Online/TCC		
			HS/Online/TCC		
			HS/Online/TCC		

*high school unweighted gpa of:

- 3.00 – 3.49 = up to 11 credit hours per semester
- 3.50+ = up to 15 credit hours per semester (must be Early Admit)

_____ **Permission for Early Admit:** This student currently has a high school unweighted gpa of _____. This student meets the 3.50 unweighted high school gpa requirement. This individual has permission to participate in Early Admit Dual Enrollment Program at Tallahassee Community College. I understand and the student understands that this is full time dual enrollment with a minimum of 12 credit hours and a maximum of 15 credit hours each semester.

This individual meets criteria for Early Admit dual enrollment and I recommend that he/she be added in the course(s) listed above. Transcript has been submitted.

School Counselor Name (please print): _____

School Counselor Signature: _____ Date: _____