



## Dual Enrollment Parent and Student Acknowledgement Form

Please initial the following acknowledgment agreement to register for dual enrollment:

I, \_\_\_\_\_ give permission to my student, \_\_\_\_\_ to participate in college courses through Eastern Oregon University.

Parent

Student

\_\_\_\_\_

\_\_\_\_\_

Springs students are eligible for **one** free EOU course per school year; this includes Get Focused!

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\_\_\_\_\_

All courses are taught online by an EOU instructor.

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All courses are taught at college level rigor.

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\_\_\_\_\_

All courses are taught in 10 week sessions.

\_\_\_\_\_

\_\_\_\_\_

Students must receive a C or above to receive high school credit.

\_\_\_\_\_

\_\_\_\_\_

Students can earn a maximum of 10 high school credits for one dual enrollment course.

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Students are considered by EOU to be the same as all other college students.

\_\_\_\_\_

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Coursework will appear on your student's college transcript and will follow them through their college career.

\_\_\_\_\_

\_\_\_\_\_

Parents cannot communicate with instructors regarding their student's grades or receive any updates from professors regarding their student's progress unless the student signs the High School Student Consent to Release Information form.

\_\_\_\_\_

\_\_\_\_\_

If the student does not wish to continue in a college course it is the student's responsibility to drop courses per EOU's timeline and process. If not followed the student may receive an F or W on their official transcript.

\_\_\_\_\_

\_\_\_\_\_

Students will follow the EOU calendar for attendance and finals

which may not align with the SCS calendar. (see attachment)

\_\_\_\_\_

Students must be continuously be enrolled in a minimum of 4 Springs classes in order to take courses at EOU.

\_\_\_\_\_

You will be financially responsible for EOU courses if you withdraw from Springs or register for a course that is not pre-approved by Springs.

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please send this document to [kathy.crudo@springscs.org](mailto:kathy.crudo@springscs.org)

Once the form is received you will be provided with the next steps for registration.

