

Dual Enrollment Authorization FormOn-FIU Campus Part-Time

This section must be completed by the school:										
☐ New Student					☐ Returning Student					
Year	Term: ☐ Fall	☐ Spring	☐ Summer	High School	Test Scores			S		
	☐ Charter ☐	Home Education	☐ Private ☐ Public	Unweighted GPA	Reading:		Writing:		Math:	
				•						
PART I: Student Information										
Pa	inther ID#			Student Full Name						
		Last:		First:			Middle:			
Grade Level (select one):		dla Cabaal)	Email:	Phone:						
	☐ 6th ☐7th ☐ 8th (Middle School) ☐ 9th ☐10th ☐11th ☐12th (High School)		Current School Name:							
By signing this form, I understand that:										
permai	permanent college and high school transcripts. Parent/Legal Guardian Signature Name			Signature			Date			
PART III	- Dual Enrollm	nent Course Appro	nval							
This secti	on must be com ool graduation re	pleted by the high s	chool Guidance Couns me students should no	selor or Parent/Legal (ot enroll in more than urse Title (Ex. Calculu	two courses p		cation Student:	C C C C A A A A A A A A A A A A A A A A	ourse 1 ourse 2 liternate Course liternate Course liternate Course liternate Course liternate Course	
By signing, the DE Coordinator/Guidance Counselor verifies the student's eligibility and approves participation in the Dual Enrollment Program.										
For Home Education Students: By signing, the student and/or Parent/Legal Guardian approves the listed courses and participation in the program.										
Guidance Counselor/School Designee Name				Signature		Email				
Parent/Legal Guardian Name (Home Education Program Only)				Signature		Email	I Date			
Note: FIU Dual Enrollment verifies student continued eligibility to enroll in the program. ¹Parent/Legal Guardian signature required if student is under 18 years of age.										