



Certification of Early Admission – Dual Credit / Concurrent Courses

WCJC Student ID Last Name (Current Legal) First Name

Social Security Number Date of Birth Email Address

Street Address City, State, Zip Code Preferred Phone Number

Student Agreement:

I certify that I am a student enrolled at _____ High School.

I am a home-schooled student enrolled at _____ school.

My graduation date will be _____, 20_____.

I understand that I will be considered a college student and will be subject to Wharton County Junior College (WCJC) rules and regulations while enrolled in WCJC courses.

I understand that Dual Credit courses must be in the WCJC course curriculum, a WCJC vocational or technical course, or a foreign language course. I understand that dual credit courses follow the WCJC Academic Calendar and must meet the number of contact hours reported to the Texas Higher Education Coordinating Board. I will be eligible for all WCJC support services, including, but not limited to, tutoring and academic advising. I understand that dual credit courses become part of my permanent WCJC transcript. I understand that I must submit a Dual Credit Course Drop Form to drop a class once the class has started. The WCJC instructor will not drop the class for me.

While I am a student at WCJC, I hereby grant the college permission to release my grade reports and other academic information to my parents/legal guardians as specified below and to the counselor and/or administrator at the above named school.

Parent/Legal Guardian Name Parent/Legal Guardian Name

Student Signature (For electronic submission, type name and WCJC Student ID.) Date

Parental Consent:

I certify that I am the parent/legal guardian of the above named student. I give my permission for him/her to enroll at WCJC and understand the afore-mentioned items related to my student's responsibilities. I understand that there are tuition and fees associated with WCJC courses and that I am responsible for payment of tuition and fees, even if courses are dropped following the start of classes.

Parent/Legal Guardian Signature Date

Office Use Only

Processed by: _____

Revised: 03/18/2020

Term Code: _____