## Accelerating Students through Concurrent ENrollmenT (ASCENT) Local Education Provider (LEP) MEMORANDUM OF UNDERSTANDING

The purpose of this document is to outline the necessary requirements for ASCENT students and their respective Local Education Provider (LEP) to participate in the ASCENT program. An LEP is defined as a district, BOCES, district charter school or institute charter school.

To be eligible for the ASCENT program, a student must:

- Complete, or be on schedule to complete, at least 12 credit hours (semester hours or equivalent) of transcripted postsecondary course work prior to the completion of his or her 12th grade year\*;
- Not be in need of basic skills coursework in their selected pathway as defined by the Colorado Commission on Higher Education's (CCHE) remedial education policy;
- Have been selected for participation in the ASCENT program by his or her high school principal or equivalent school administrator;
- Have satisfied the minimum prerequisites for the course(s) before his or her enrollment in the course(s);
- Not have participated in the ASCENT program in previous years;
- Maintain an updated Individual Career and Academic Plan (ICAP);
- Sign up for the College Opportunity Fund (COF) stipend;
- Apply to and be accepted to the college where he or she intends to concurrently enroll;
- Receive notification from a district or charter school representative that he or she has been selected to participate in the ASCENT program on or before June 1<sup>st</sup> of the year preceding the ASCENT year;
- Upon notification, register for college course(s), pay any applicable fee, and purchase books (if appropriate).

\*Note: Does not include Advanced Placement (AP), International Baccalaureate (IB), College Level Education Program (CLEP), prior learning, or experiential courses, unless these exams/experiences have been converted to transcripted credits on a college transcript.

## Please initial each statement and include all relevant signatures on final page:

	<ul> <li>I attest that the students listed in the accompanied list have met the requirements to be potentially eligible for the ASCENT program for the 2016-17 academic year. This list is correct and accurate to my knowledge.</li> <li>I understand that submission of this request does not guarantee full funding of the request and attest that the students listed in the accompanied list have pursued alternative postsecondary options, including completing the FAFSA.</li> </ul>	
	(Local education provider name)	has identified
	(Number of slots*) needed for potential ASCE academic year.	ENT participation for the 2016-17
	* 1 ASCENT slot = 1 full-time <b>OR</b> 2 part-time students (Figure = 3-11 credit hours)	Full-time = 12+ credit hours; Part-

to th not l requ	local education provider (LEP) is aware that all student and LEP records applicable as ASCENT program must be maintained by the district/charter school, including, but limited to transcripts, ICAP, ASCENT application, etc. These documents may be tested by the Colorado Department of Education as verification of student eligibility for confirmation of regulatory compliance.
for a	an eligible signatory for my local education provider. An eligible signatory is: (1) a district, the superintendent or authorized representative; (2) for a charter school, the cipal or authorized representative; or (3) for a BOCES, the executive director or sorized representative.
	ES: Please also include the signatories for the district(s) you have contracted with for SCENT services, as these students will still be counted through their home district.
*For charte district/age	er schools: It is recommended that you also include signatories for your authorizing ncy.
SCHOOL	DISTRICT, BOCES OR CHARTER SCHOOL
Bv·	
Name:	
Title:	
LEP name:	
Date:	
By:	
Name:	
Title:	
LEP name:	
Date:	
By:	
Name:	
Title:	

This document must be signed and returned to the Colorado Department of Education (CDE) no later than May 2, 2016. A list of eligible ASCENT students with SASID, date of birth, school code, and district code must accompany this document. To ensure privacy and security of student information, please submit via CDE's secure file transfer system. Directions for submission can be found on CDE's ASCENT Request Submission webpage.

LEP name: Date: