ASCENT
Agreement and Registration Form

You have indicated that you are interested in enrolling in the 5th year ASCENT program. This program allows you to take a full schedule of college course work immediately following your senior year of high school.
Persons under twenty-one years of age, who have completed 12 college credit hours, and do not need remediation in their selected pathway are eligible for this program. To enroll at an eligible post-secondary institution a student must have completed the minimum course prerequisites and all required assessments.

☐ This student is an international student attending high school on an F1 Visa. INELIGIBLE FOR ASCENT

SECTION A: To be completed by student (PLEASE PRINT)

Name of Student _____ Term _____

Post-Secondary Student ID # _____ SASID # _____School District ID_____

Address _____ City _____ Zip _____

Phone _____Email _____

Date of Birth _____ Age _____ Current Grade in School _____

Currently Attending: _____ High School College Planning to attend_____

Name of Parent / Guardian _____

List Course work completed by end of senior year

Subject	Course Number	Title	Credit Hours	Course Location (H.S./College)	Counselor Initials
MAT	120	Math for Liberal Arts (EXAMPLE)	4	College	tbd

List Course work intended to be taken in the 5th year

Subject	Course Number	Title	Credit Hours	Course Location (H.S./College)	Counselor Initials
MAT	120	Math for Liberal Arts (EXAMPLE)	4	College	tbd
Alternative Choice (if class(es) are not available)					

Attention Student: Prior to adding, dropping or withdrawing from a class, you must see your **college advisor and high school counselor**.
Attention Student and Parent or Guardian: Your signature indicates that you wish the above named student to participate in the ASCENT Program and agree to the following:

- ✓ That advice and counsel regarding such participation has been received from your current high school.
- ✓ If the student receives a grade of "F" or an "Incomplete" or withdraws in one or more of their classes after the designated drop period, the student and parent may be responsible to the sponsoring School District for payment for the respective class (es).
- ✓ The course(s) fits with your Individual Career & Academic Plan (ICAP).
- ✓ In compliance with the **Family Educational Rights and Privacy Act (FERPA) of 1974**, the Student gives permission to the above noted college to report absences, disciplinary issues, and the release of grades, transcripts, in progress grades, and class schedules, as available, to the above noted High School for the courses enrolled under the ASCENT program.
- ✓ The signatures indicate authorization of my College Opportunity Fund (COF) to the College. I authorize the High School/School District to release my SASID # to the college for the purpose of COF, at institutions which receive COF funding.

Section B: To be signed by student and student's parent/guardian

I understand that this agreement entitles me/my child to enroll in college courses. I understand the following:

1. I will meet the same course expectations and prerequisites as college students, as noted in course catalog and/or syllabus.
2. The course satisfies college degree or certificate and is in line with the students' ICAP.
3. Course credits may transfer if I earn a C or better in a Guarantee transfer course, or accepted by post secondary institution.
4. The grade received in this course will appear on my official high school and college transcript.
5. If I withdraw from the course at the postsecondary institution after the drop/add date, I will receive a W or F on my college transcript.
6. With regard to college activities, qualified students may participate in activities but are not eligible for NCAA athletic activities.
7. I will need to register for College Opportunity Funding and I understand the credits earned will be deducted from the COF lifetime account, at institutions which receive COF funding.
8. I understand I may only enroll in Guarantee transfer courses and/or courses which apply to a specific pathway.
9. I understand the school district will hold my high school diploma and not count me as a graduate until I have completed the ASCENT program.
10. Students who wish to enroll in college classes the summer immediately following their senior year must pay their own tuition.

In signing this agreement, I authorize the college to release my transcript to my school district at the end of the course and agree to all information under Sections A and B.

_____ _____

Student Signature and Date Parent/guardian Signature and Date

Deliver this form to your high school counselor.
This agreement is student and college specific. A separate agreement and college application must be completed for each eligible postsecondary institution that the high school student plans to attend.

Section C: Student Eligibility: To be completed by High School counselor/principal. Check all that apply.

_____ This student is under 21 years of age.
_____ This student has successfully completed 12 college credit hours during high school
_____ The student does not need any remediation courses
_____ The student is currently in the 12th grade.

High School counselor/principal Signature: _____ Date: _____
Title _____

Section D: School District & College Approval
☐ The school district agrees to pay the tuition for _____ credits this term.

Approved by Principal (or designee)
Name of High School: _____
Comments: _____
Signed: _____ Title: _____Date:_____

Superintendent (or designee)
or charter school authority signature: _____ Date: _____

Approved by college administrator
Name of College: _____
Comments: _____
Signed: _____ Title: _____Date:_____