

## Alpena Community College <u>DUAL ENROLLMENT CERTIFICATION FORM</u> (To be completed by High School Principal or Counselor)

I hereby certify that	t ,	is el	is eligible and approved to attend the following		
			-	ester commencing January 15,	
` ,		chigan Dual Enrollment l			
		oga = aa. = oo		•	
Course No.	Course Title	Cr	/ Ct	Please check if the credits will be used to satisfy high school graduation.	
(ENG-111-7020)	English (111)	(3)	(3)		
(2113 111 1020)	• , ,		(0)		
			/		
			/		
It is understood that	t the District will be b	illed at the In-district tuit	ion rate pe	r contact hour for the above	
course(s), as well a	as the semester reco	rds and registration fee o	of \$30.00, a	and all other required fees	
assigned to the cou	ırse(s).				
Release of Infor	mation Authorizat	<u>ion</u>			
By signing be	elow, I agree and autho	orize the exchange of all in	formation be	etween Alpena Community College	
(ACC) and my High S	School regarding my cl	ass attendance, class perfo	ormance, gr	ades, discipline and any other	
applicable school red	cords and information n	ecessary for ACC and or n	ny High Sch	ool to evaluate, grade, assess,	
discipline or otherwis	e take any other appro	priate action consistent wit	th ACC's an	d my High School's policies,	
provisions, statutory	authority and requirem	ents as they may affect or p	pertain to m	e.	
l acknowledg	ge that the foregoing ex	change of information is ne	ecessary ar	d required for a Dual Enrolled	
course and hearby re	eleases any and all righ	nt to privacy and confidentia	ality under a	ny local, state or federal law that	
would otherwise prev	ent the exchange of sa	aid information between AC	CC and my I	High School.	
Principal/Counsel	lor Signature	School District		Date	
Student Signature		Date			