



# DUAL ENROLLMENT FUNDING ACKNOWLEDGEMENT FORM

Student LAST Name \_\_\_\_\_ Student FIRST Name \_\_\_\_\_

Current High School \_\_\_\_\_ HS Graduation Year: \_\_\_\_\_

CPTC Student ID #: \_\_\_\_\_ Current Major: \_\_\_\_\_ Amount Due: \$ \_\_\_\_\_

**As the parent/guardian of the student above, I understand the following (please initial each item):**

\_\_\_\_\_ My student is registering for college credit hours which may not be eligible for Dual Enrollment funding available under the Dual Enrollment Funding Program.

\_\_\_\_\_ I am responsible for keeping track of the number of all credit hours attempted and/or earned by my student in the Dual Enrollment program at any/all colleges and/or universities.

\_\_\_\_\_ If my Student is not eligible for Dual Enrollment funding for a reason listed below, I agree to pay all tuition and course related fees that are not covered by the Dual Enrollment funding program:

- Enrolled in a course not listed on the [GaFutures.org](http://GaFutures.org) directory.
- Exhausted the 30 credit hour funding cap
- Enrolled in a [General Education \(core\)](#) course as a 9th or 10th grader
- Failed to maintain [Satisfactory Academic Progress \(SAP\)](#). (67% pass rate AND 2.0 college GPA.)
- Withdrew from two or more courses - no longer eligible for dual enrollment funding
- Retaking a course for which Dual Enrollment funding has already been applied
- Attending a high school that does not participate in the Dual Enrollment funding program
- Enrolled in a course that your high school counselor will not authorize Dual Enrollment funding to cover

\_\_\_\_\_ If my student is eligible for [HOPE Grant or HOPE Career Grant](#) funding, I agree and authorize Coastal Pines Technical College to apply the HOPE Grant and/or HOPE Career Grant towards tuition. Coastal Pines Technical College will waive mandatory fees and book costs for all high school students, but course related fees may still apply.

\_\_\_\_\_ As the parent/guardian of the above named student, my signature on this waiver certifies that I have read, understood, and accepted the above information and the content regarding Dual Enrollment policies found at [www.coastalpines.edu](http://www.coastalpines.edu) and [www.GaFutures.org](http://www.GaFutures.org).

\_\_\_\_\_ I agree to hold harmless and expressly waive any legal claims that could otherwise be made against Coastal Pines Technical College or the Technical College System of Georgia with regard to any authorized actions taken by the technical college, or any out-of-pocket payments made by me to enroll my student in Dual Enrollment courses.

Parent/Guardian Full Name (PRINTED) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_