



## Part II: To be Completed by the Home Study Program Administrator

\*9<sup>th</sup> Grade Start Date: \_\_\_\_\_ (mm/yyyy)

\*Scheduled to Graduate in \_\_\_\_\_ (mm/yyyy)

\*During the term of enrollment for this application, the student is enrolled in:  9th  10th  11<sup>th</sup>  12<sup>th</sup>

### DUAL ENROLLMENT HOME STUDY PROGRAM PARTICIPATION AGREEMENT

\_\_\_\_\_ Home Study must agree to the following terms to participate in the Dual Enrollment (the "Dual Enrollment Program") pursuant to O.C.G.A. §20- 2-161.3.

The above-mentioned Home Study agrees to:

- a. Participate in the Dual Enrollment Program in accordance with this Acknowledgement, the Dual Enrollment Program Regulations, all applicable federal, state, and local laws, rules and regulations;
- b. Obtain written consent of a parent or guardian to allow the student to participate in the Dual Enrollment Program;
- c. Agree to accept toward Home Study completion requirements, the postsecondary credit of an eligible Dual Enrollment Program student who successfully completes an approved course at an Eligible Postsecondary Institution;
- d. Record on the student's Home Study transcript each approved course name, grade, and amount of credit hours and course unit credits earned for each course taken as required in the Dual Enrollment Program Regulations;
- e. Comply with the Dual Enrollment Program Regulations, as amended or modified from time-to-time, and to comply with such instructions as may be issued from time- to- time by GSFC, including instructions contained on administrative forms and procedures, Dear Colleague Letters and School Updates for use in the administration of the Dual Enrollment Program; and
- f. Comply with all applicable federal and State of Georgia privacy and data security laws pertaining to proper access, creation, modification, handling, storage, transfer, transmission, dissemination, sharing or destruction of confidential information, including, but not limited to the Family Educational Rights and Privacy Act of 1974, as amended ("FERPA"), pertaining to the Home Study and the students.

\_\_\_\_\_  
\*Print Name of Certifying Home Study Official

\_\_\_\_\_  
\*Signature of Certifying Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
GSFC Assigned Home Study Code

*Upon completing the high school section found on the following page, forward the application to the postsecondary institution. Incomplete applications submitted to GSFC will not be processed.*

\*Denotes required fields

*Beginning Fall term 2018, the Dual Enrollment Program allows up to 15 semester or 12 quarter hours per term.*

\_\_\_\_\_  
\*Student Name

\_\_\_\_\_  
\*Student SSN

*Upon completing the high school section, the application must be given to the college (postsecondary) to complete Part III.  
Applications submitted to GSFC which are incomplete or with more than the 15/12 credit hours per term maximum limit cannot be processed.*

**Part II: To be completed by Home Study Administrator**

**Part III: To be completed by Postsecondary Official**

To be completed by Home Study Administrator		To be completed by Postsecondary Official			
*High School Course Number	*High School Course Name	*Postsecondary Institution Course Number	*Postsecondary Institution Course Name	*Credit Hours	Campus Code 1- Online 2- At College 4 Other

<p>_____</p> <p>*Print Name of Certifying Home Study Official</p> <p>_____</p> <p>*Signature of Certifying Home Study Official</p> <p>_____</p> <p>*Date</p> <p>_____</p> <p>*Telephone Number</p> <p>_____ @ _____</p> <p>*Email Address</p>	<p>*Postsecondary Institution: _____ *Term _____ *Year _____</p> <p>*Title IV School Code: _____</p> <p>_____</p> <p>*Print Name of Postsecondary Official</p> <p>_____</p> <p>*Signature of Postsecondary Official <span style="float: right;">*Date</span></p> <p>_____</p> <p>*Telephone Number</p> <p>_____ @ _____</p> <p>*Email Address</p>
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Scan and email **completed application** to [dualenrollment@gsfc.org](mailto:dualenrollment@gsfc.org) OR mail to: GSFC, 2082 E. Exchange Place, Tucker, GA 30084