



High School Counselor Dual Enrollment

The completed form can be emailed or mailed to Coppin State University - Dual Enrollment Program Coordinator or email at dualenrollment@coppin.edu or mail to the following address.

To the School Counselor: Please list all courses the student must take at Coppin State University to complete their **high school graduation requirements**. Students are not allowed to take the following courses: Evening, Graduate, and any course with a prerequisite. Please sign the completed form after reviewing it with the student. The completed page can be emailed to Coppin State University Dual Enrollment Coordinator at dualenrollment@coppin.edu. Please attach a copy of the **unofficial transcript** with the enrollment form.

To the Students: You must meet with your guidance counselor to discuss the [courses](#) in which you will enroll as a participant in the Coppin State University Dual Enrollment Program. This will serve as a verbal agreement between the student, guidance counselor, and parent. After meeting with your guidance counselor to discuss your courses, please print and sign this form, which you will then provide to your guidance counselor for approval signature.

Last Day To Withdraw Deadlines: Please review the [academic calendar](#) for withdrawal dates. If you withdraw after the deadline, **the school district may require you to pay the full tuition and fees for the term**. For more dates and deadlines, go to www.coppin.edu/academics/academic-calendar.

Priority Of Course Selection	Course Name	Subject	Catalog Course #
1			
2			
3			
4			

I hereby certify that I understand the requirements necessary for my high school graduation.

Print Name: _____ Date: _____

Signature of Student: _____

I hereby certify that as a counselor at the student's high school of record, I have provided Coppin State University with the courses needed to satisfy the high school graduation requirements.

Print Name: _____ Date: _____

Signature of School Counselor: _____