



Letter of Intent to Participate in College Credit Plus

PLEASE PRINT

Date _____

AFTER ~~APRIL~~ (March 29), YOU WILL NEED PERMISSION FROM THE HIGH SCHOOL PRINCIPAL TO PARTICIPATE.

Student Name _____

Parent/Guardian Name _____

Home Address _____

PLEASE INDICATE PREFERRED METHOD OF CONTACT:

Parent Phone Number (Day) _____ (Evening) _____

Parent Email Address _____

Student Contact Info _____

School _____ Grade _____

PLEASE INDICATE ALL PROGRAMS YOU ARE INTENDING TO PARTICIPATE IN:

- CCP classes provided by RVHS staff
 Online with Terra State University
 University of Rio Grande on campus full day
 University of Rio Grande on campus partial day

I would like to declare my intent to participate in the College Credit Plus program. I understand that signing this form does not require that I participate during the coming school year, and I may decide not to participate without consequence.

I also understand that it is my responsibility to notify my school if I do not gain admission to my selected institution of higher education or choose not to participate in the program.

In addition, I certify that I have received counseling about the College Credit Plus program concerning the rules and regulations for both my school and the college, and that I understand my responsibilities, the benefits and possible risks of participating in the College Credit Plus program.

Please sign and return this form to the high school by ~~April~~ (March 29).

Student Signature _____

Parent Signature _____