VICTOR VALLEY COLLEGE

Concurrent Student Enrollment Form

STEP 1: Complete application for VVC admission online at www.vvc.edu.
STEP 2: Take the Assessment Test, and attend Orientation.
STEP 3: Bring the completed Concurrent Student Enrollment Form with principal’s or parent’s signature, Application confirmation page, and assessment scores to VVC Admissions & Records Office. The student MUST be present with picture ID.
STEP 4: Register for classes at the VVC Admissions & Records Office.

Part I: Student Information
Select ONE year and term you are applying for: 20____  ☐ Summer  ☐ Fall  ☐ Spring  ☐ Winter
Name: __________________ ___________________________ VVC Student ID#: ________________ Birth Date: ________
Last  First  M.I.
Name of Local School: ____________________________________ Grade level ________ Graduation date: ____________

Parental Consent:
By signing below, I understand that VVC is an open, unsupervised, and adult oriented learning environment. I also understand that instructional materials in some courses may be unsuitable for children.
Student’s Signature ____________________________ Parental Approval __________________________ Date ____________
Signature of parent or guardian

Part II: Principal Certification
After careful review, I certify that this student has demonstrated adequate preparation in the discipline to be studied and can benefit from advanced scholastic or vocational education. For the Winter and Summer session, I also certify that this student does not exceed the 5% statutory grade level limit of students recommended to attend VVC. (Ed.Cd. 76001 (1)

Principal/Designee Name (Please Print)
________________________________________
Principal/Designee Signature
________________________________________
Date Name of School

Part III: Course Selection: Please note there is an 11 unit limit for fall and spring semesters; 8 units for winter and summer sessions.

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<th>Section #</th>
<th>Course Name</th>
<th>Units</th>
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Initials of K-12 School Official
(Please initial each course)
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RELEASE OF CREDIT TO HIGH SCHOOL: I hereby authorize Victor Valley College to release my education records to my high school as noted above for high school credit and acknowledge that grades earned remain on my permanent record at Victor Valley College. Additionally, I authorize VVC to release my education records to my parents/legal guardian.

Signature of Student
________________________________________________________________________

Eligibility for above course(s) does not guarantee course will be open at time of registration at VVC.

For Office Use Only: VVC Admissions & Records Signature __________________________ Date ____________

04/28/09