



WESTMINSTER COLLEGE

# EARLY COLLEGE PROGRAM

## HIGH SCHOOL PERMISSION FORM

*Must be filed for any courses taken while high school classes are in session.*

### STUDENT INFORMATION

\_\_\_\_\_ has our permission to enroll as a high school student in  
*STUDENT NAME*

\_\_\_\_\_ and \_\_\_\_\_  
*COURSE 1: NUMBER/TITLE* *COURSE 2: NUMBER/TITLE* *(OPTIONAL)*  
at **Westminster College** for the *FALL* *SPRING* semester of \_\_\_\_\_.  
*(CIRCLE ONE)* *YEAR*

**Please attach a copy of the student's current high school transcript when submitting this form.**

### APPROVAL

We agree to abide by the college and high school regulations pertaining to this program.

Signed: \_\_\_\_\_ *PARENT/GUARDIAN* *DATE*

Approved: \_\_\_\_\_ *GUIDANCE COUNSELOR OR PRINCIPAL* *DATE*

\_\_\_\_\_ *HIGH SCHOOL*

\_\_\_\_\_ *REGISTRAR* *DATE*

### QUESTIONS?

#### Contact Us:

Registrar's Office | McKelvey Campus Center  
Registrar: Dr. Kristen Amick  
**Phone: 724-946-7135 | Fax: 724-946-6337**  
**Email: amickkm@westminster.edu**

Westminster College  
319 S. Market Street  
New Wilmington, PA 16172-6337