

WESTMINSTER COLLEGE  
Lifelong Learning Program  
**HIGH SCHOOL - DUAL ENROLLMENT  
CLASS REGISTRATION**

**HIGH SCHOOL PERMISSION FORM**

*Must be filed prior to each semester for each course*

\_\_\_\_\_ has our permission to enroll  
Student Name  
as a high school student in \_\_\_\_\_  
Course Name  
at **Westminster College** for \_\_\_\_\_  
Semester Year

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

Signed: \_\_\_\_\_  
Parent/Guardian Date

Approved: \_\_\_\_\_  
Guidance Counselor Date

\_\_\_\_\_  
Principal Date

\_\_\_\_\_  
Director of Adult & Graduate Studies Date

*A grade report will be mailed to the High School office at the end of the semester.*

Westminster College - Adult & Graduate Studies  
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