

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
319 S. Market St. - McKelvey Campus Center, Rm. 268
New Wilmington, PA 16172-0001
Phone 724-946-7353 - Fax 724-946-6351
conted@westminster.edu