



Summer 2015 Recommendation for Concurrent Enrollment Program

Office of Admissions and Records • 25555 Hesperian Blvd. Hayward, CA 94545 • concurrent@chabotcollege.edu
CONCURRENT ENROLLMENT PROGRAM IS FOR HIGH SCHOOL STUDENTS IN THE 10TH, 11TH AND 12TH GRADES.

DEADLINE TO SUBMIT: May 26, 2015

Before submitting this form you must complete a current admission application. Please attach your current high school transcripts and parent release

SECTION 1: STUDENT IDENTIFICATION

TO BE COMPLETED BY STUDENT.

Last Name First Name Middle

Street Address

City, State, Zip

() / / _____
Phone Number Date of Birth Chabot Student Id Number

Email (registration notification will be sent here)

Name of School: _____

School Address: _____

Current Grade level: _____

By signing this form

- I am in the 10th, 11th or 12th grade.
- I acknowledge that I will be earning college credit for courses completed at Chabot College.
- I will abide by the policies and enrollment conditions of the Concurrent Enrollment Program.
- I understand I will be dropped from courses not listed on my recommendation.
- I understand that completion of this form does not constitute in registration to classes.
- I understand that courses listed on this recommendation are for Chabot College only.

Student signature _____

SECTION 2: SCHOOL COUNSELOR/PRINCIPAL DESIGNEE

REQUESTED COURSES

COURSE TITLE & NUMBER (For example: ENGL 1A)	UNITS (3.0)	PREREQUISITES*
1.		
2.		
ALTERNATE 1.		
ALTERNATE 2.		
COURSE RESTRICTIONS: <ul style="list-style-type: none"> • Concurrent Enrollment is limited to a maximum of 2 courses or 6 units. • Enrollment in physical education (P.E.) and basic skills courses (ENGL 100 level, all ESL courses, MATH 100 level) are <u>not</u> allowed. (Title 5 Regulation, sec.55002) • Per Chabot English Department policy, student must be at least 16 years old or in junior standing to take English courses. 		<ul style="list-style-type: none"> • * Many courses require the completion of prerequisites courses taken at Chabot College or their equivalent at another institution. Consult the course description in the class schedule or college catalog for identification of prerequisites. (Title 5 Regulation, sec.55500) • Assessment must be completed prior to registration for English and Math courses. Please check Assessment website for schedule.

- As per Ed. Code 76001, the high school principal of the school certifies, by signing this form that no more than 5 percent of the total number of students per grade level shall be recommended for enrollment at Chabot College for the Fall semester.
- I certify that I am the School Principal / Designee, and authorized to sign this form.
- I certify that the above recommended _____ (# of units) are based on the student's ability to benefit from "advanced scholastic or vocational work."

AUTHORIZED SCHOOL OFFICIALS (Signatures are required every term)

Principal or Designee _____ Date _____

SECTION 3: PARENT OR GUARDIAN

By signing this form

- I acknowledge my child's participation in the Concurrent Enrollment Program.
- I certify that the Counselor/Principal named above is my child's school/district authorized representative.
- I hereby give permission to release my child's school transcript to Chabot College.
- I have read and acknowledge the policies and enrollment conditions of the Concurrent Enrollment Program.

Parent / Guardian Signature _____ Date _____

FOR OFFICE USE ONLY

APPROVED Director of Admissions & Records _____ Date _____

DISAPPROVED