**WCPSS Co-Enrollment Form for High School Courses**

**Grades 6 - 12**

Students requesting to earn WCPSS graduation credit through a co-enrollment opportunity must first meet with his/her school counselor to discuss the request and determine eligibility. Once eligibility is determined, the student, along with his/her parent/guardian, must submit a signed WCPSS Co-Enrollment Form to his/her school counselor for principal approval.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Student’s Name | | | | |  | | | | | | | | | | | | | | ID# | | |  | |  | |  | |
| Date of Birth | | |  | | | |  | |  | Grade | |  | | | WCPSS High School | | | | |  | | | | | | | |
| Address | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Parent Name | | | |  | | | | | | | | | Parent E-mail | | | |  | | | | | | | | | | |
| Parent Cell Phone | | | | | |  | | | | | | | Parent Work Phone | | | | |  | | | | | | | | | |
| School Counselor | | | | | |  | | | | | | | Email | | |  | | | | | | | | | | | |
| Institution of Co-Enrollment | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | |  | | | | | |  | | | |  | | | | |
| **COURSE INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Course Name** | | | | |  | | | | | | | | Credit Requested: Yes 🔿 No 🔿 | | | | | | | | | | | | | | |
| **Term**: | 🔿 Fall 🔿 Spring | | | | | | | | | | **Daily Course Schedule** : A.M. 🔿 P.M. 🔿 Time of Instruction: | | | | | | | | | | | | | | | | |
| **Type of Course** | | | | | | (Check if applicable): 🔿 EOC Exam\* 🔿 CTE Post Assessment\* 🔿 NCFE\* | | | | | | | | | | | | | | | | | | | | | |
| Course is approved by WCPSS Academics for co-enrollment Yes 🔿 No 🔿 | | | | | | | | | | | | | | | | | | | | | |
| If no, has the request for course approval been submitted? Yes 🔿 No 🔿 | | | | | | | | | | | | | | | | | | | | | |
| Submit request for course approval to Terry Saint, Admin Asst. for HS Programs (tsaint@wcpss.net) | | | | | | | | | | | | | | | | | | | | | |
| To be completed by the WCPSS School Counselor | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Course Name | | | | | | | |  | | | | | | Course Number | | |  | | | | Credit to be awarded | | | |  | | |
|  | | | | | | | | | |  | | |  | | | | | |  | | | |  | | | | |
| **COURSE INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Course Name** | | | | |  | | | | | | | | Credit Requested: Yes 🔿 No 🔿 | | | | | | | | | | | | | | |
| **Term**: | 🔿 Fall 🔿 Spring | | | | | | | | | | **Daily Course Schedule** : A.M. 🔿 P.M. 🔿 Time of Instruction: | | | | | | | | | | | | | | | |  |
| **Type of Course** | | | | | | (Check if applicable): 🔿 EOC Exam\* 🔿 CTE Post Assessment\* 🔿 NCFE\* | | | | | | | | | | | | | | | | | | | | | |
| Course is approved by WCPSS Academics for co-enrollment Yes 🔿 No 🔿 | | | | | | | | | | | | | | | | | | | | | |
| If no, has the request for course approval been submitted? Yes 🔿 No 🔿 | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Submit request for course approval to Terry Saint, Admin Asst. for HS Programs (tsaint@wcpss.net) | | | | | | | | | | | | | | | | | | | | | |
| To be completed by the WCPSS School Counselor | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Course Name | | | | | | | |  | | | | | | Course Number | | |  | | | | Credit to be awarded | | | |  | | |
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**\* Send copy of this form to school-based Testing Coordinator and/or Career Development Coordinator**

**We, the undersigned, have read the back of this form and do understand and agree to comply with the requirements of the program being attended.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Student Signature |  | | | Date |  |
| Parent/Guardian Signature | |  | | Date |  |
| WCPSS School Counselor Signature | | |  | Date |  |
| WCPSS School Principal Signature | | |  | Date |  |
| Institution of Co-Enrollment Signature | | |  | Date |  |

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**Co-Enrollment Guidelines for WCPSS High School Credit**

Students requesting to earn WCPSS graduation credit through a co-enrollment opportunity must first meet with his/her school counselor to discuss the request and determine eligibility. Once eligibility is determined, the student, along with his/her parent/guardian, must submit a signed WCPSS Co-Enrollment Form to his/her school counselor for principal approval.

**The following criteria must be met in order to be eligible to earn a WCPSS graduation credit:**

* The school issuing the graduation credit must be accredited by one of the six regional accrediting agencies:
  + Middle States Association of Colleges and Schools
  + New England Association of Schools and Colleges
  + North Central Association of Colleges and Schools
  + Northwest Commission on Colleges and Schools
  + Southern Association of Colleges and Schools
  + Western Association of Schools and Colleges
* The course for credit must be pre-approved by WCPSS Academics to ensure alignment to North Carolina state standards.
* The student must provide the assigned WCPSS school with an official transcript documenting final grades assigned by the institution where the student is co-enrolled. The assigned WCPSS school will make final decisions regarding the awarding of credit on the WCPSS transcript.
* In accordance with Board Policy 3410, all students enrolled in high school courses must take all EOCs, CTE Post-Assessments, and NCFEs as required by the State Board of Education. The results of EOCs, CTE Post-Assessments, and NCFEs will count as 20% of the student’s final grade. These assessments will be administered at the student’s assigned WCPSS school and must be completed in order for high school credit to be earned.

**\*Note that credit earned will be placed on the WCPSS transcript as a transfer credit from the sending school**

**Additional requirements for co-enrollment:**

* Student must remain enrolled and in attendance at their assigned WCPSS school for at least 50% of the instructional day. There is no requirement that the WCPSS school adjusts a student’s schedule based on the request for co-enrollment, including students with IEPs, 504s or other individual plans.
* Students with IEPs must be offered all services outlined within the IEP by the institution where the student is co-enrolled.
* The assigned WCPSS school should be immediately notified of any change in enrollment status at the institution where the student is co-enrolled (i.e. - course withdrawal or change in course selection).
* All curriculum materials and related instruction for co-enrollment courses must be provided by the institution where the student is co-enrolled.