

GRAND VALLEY LOCAL SCHOOL DISTRICT

COLLEGE CREDIT PLUS CLASSROOM STUDENTS

The undersigned, _____, are the parent(s) of _____, a student enrolled at the _____ School. _____ **[Student's Name]** is placed in one or more College Credit Plus classrooms but is not enrolled in a college or university and is not participating in the College Credit Plus program.

The parents and student hereby represent and agree as follows:

- A. _____ **[Student's Name]** is not earning college credit from the course(s) taken in the College Credit Plus classroom(s).
- B. We hereby understand and agree that _____ **[Student's Name]** will likely be required to retake the course upon enrollment at an institution of higher education if college credit is desired.

Date: _____

Parents/Guardian

Date: _____

Parents/Guardian

Student (Child)

6/22/15