Date

Washburn Tech

Must Be Filled Out By Student: Name: _____ Last First Middle Name of High School: _____ Current Grade: 10 11 12 Program Desired: ______Start Term: ______ Why are you interested in attending Washburn Tech? What are your career interests/plans? _____ Must Be Filled Out By Parent/Legal Guardian: > I understand that by allowing my child to participate in the Dual Enrollment program, I will be responsible for following the guidelines and academic calendar of not only the high school, but also of the college. I hereby give my permission for my son/daughter, ______to take Dual Enrolled courses provided by Washburn Tech > I will be responsible for any tuition and fees associated with courses taken on Washburn Tech Campuses Student Signature Date Parent/Guardian Signature Date To Be Filled Out By High School Principal or Counselor: Please rate the above-named student applicant on the following characteristics: Characteristic High <u>Average</u> Low Adaptability to school rules Ability to get along with others Willingness to assume responsibility Work habits Dependability Completes assignments on time Maturity Number of disciplinary referrals G.P.A.: Absences: _____ Tardies: _____ Additional Comments:

Principal/Counselor Name: _____ Session Approved: AM PM FD

Principal/Counselor Signature:

Date:

PLEASE RETURN THIS FORM TO THE HIGH SCHOOL COUNSELOR.

High School Student Recommendation Form

Date Rec'd by Washburn Tech:

