



---

---

**Dual Enrollment Parent Signature Form**

---

---

**Student's Legal Name** (please print): \_\_\_\_\_

**Student's ESCC ID#** \_\_\_\_\_

As a parent/guardian of the above student, I agree to allow any standardized test (SOL, PSAT, SAT scores and/or high school transcript to be submitted to the Eastern Shore Community College. I also agree to allow placement testing and enrollment into dual enrollment classes with ESCC. I understand these classes are located at either the high school or designated campus or site. Additionally, I understand that dual enrollment classes are college level classes and final grades will be part of my child's permanent college record. I further certify that I, and the above student, have completed the domicile form included with the application for admission to determine in-state or out-of-state residency.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_