



Early Entry Course Recommendation/Permission

This section is to be completed by student.

I, _____, a high school **junior/senior** (circle grade level)
Student's Name

_____ High School, am requesting permission to
(Name of high school)

enroll in Chadron State College course _____ for
(Course Number and Name)

the _____ 20____ semester.
(Fall or Spring)

Date _____ Signed _____
Student

This section is to be completed by student's high school counselor or principal.

I certify that this student is eligible for enrollment in this course under at least one of the following Chadron State College Early Entry Course guidelines: **Check all that apply.**

- Student has attained a GPA of at least 3.0 (4.0 scale). **Actual GPA** _____
- Student earned an ACT composite score of at least 20 or an equivalent score on another standardized test. **Composite score attained** _____.
- Student earned an ACT sub-score of at least 20 or equivalent on another standardized test.
Sub-score (category related to requested course): **Math** _____ **English** _____ **Reading** _____ **Science** _____
- Student ranks in the upper 1/3 of their high school class.

In addition to being academically qualified, it is my opinion that this student is capable of successfully completing a **college-level** course and is, therefore, recommended for acceptance into this course.

Date _____ Signed _____
High School Counselor/Principal

This section is to be completed by student's parent/guardian.

As the parent or legal guardian of _____, I confirm that he/she is academically qualified for enrollment in this course under Chadron State College's Early Entry program policies. I also believe he/she is capable of successfully completing this course. Therefore, I authorize Chadron State College to enroll my son or daughter in the course listed above.

Date _____ Signed _____
Parent/Guardian of Early Entry Student