



# FDTC Dual Enrollment Program Permission/Communication Form

\_\_\_\_\_ has permission to enroll at Florence-Darlington Technical College.  
STUDENT'S LEGAL NAME

He/She is a  Freshman  Sophomore  Junior  Senior at \_\_\_\_\_  
HIGH SCHOOL NAME

with a cumulative GPA of \_\_\_\_\_ and a projected graduation year of \_\_\_\_\_.  
WEIGHTED YEAR

**Please check appropriate enrollment status:**

- Dual Credit enrolled (receiving high school course credit for college courses)
- Concurrently enrolled (not receiving high school course credit for college courses)

I \_\_\_\_\_, give permission for Florence-Darlington Technical College to  
Student's name  
communicate with the high school listed above and \_\_\_\_\_ about my  
PARENT(S) OR LEGAL GUARDIAN (PLEASE PRINT)  
academic programs and enrollment status while I am part of the Dual Enrollment or Early College  
Academy Program at Florence-Darlington Technical College.

\_\_\_\_\_  
HIGH SCHOOL PERSONNEL SIGNATURE/DATE

\_\_\_\_\_  
STUDENT SIGNATURE/DATE

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE/DATE

**Please return signed form to:**

**DualEnrollment@fdtc.edu**

**or Office of Admissions | Main Campus | Building 5000 | Room 5313**