MIDDLETOWN CITY SCHOOLS
COLLEGE CREDIT PLUS INTENT TO PARTICIPATE

Student Name _____ Current Grade _____
Last First

Student ID # _____ Student Email _____

Student Address _____ Student Cell _____

_____

Parent Name _____

Parent Email _____ Parent Cell _____

I would like to declare my intent to participate in the College Credit Plus program. I understand that signing this form below does not require that I participate during the next school year and I may decide not to participate without consequence. I also understand that it is my responsibility to notify my school guidance counselor if I do not gain admission to my selected institution of higher education or choose not to participate for some other reason.

I also understand that it is my responsibility to contact my guidance counselor by **March 1, 2018 to set up a student/parent meeting by March 23, 2018** to receive additional counseling about this program including enrollment information. I must also submit my college application signature page to my school guidance counselor by April 13, 2018 in order to process and meet the deadlines of the college.

In addition, I certify that I have received counseling about the College Credit Plus program concerning the rules and regulations for both my school and the institution of higher learning, and that I understand my responsibilities, the benefits and possible risks of participating in the College Credit Plus program.

Student Signature _____ Parent Signature _____

Middletown City Schools Guidance Counselors:

Christa Wilson, MHS students A-F	cwilson@middletowncityschools.com
Gary Sturm, MHS students G-N	gsturm@middletowncityschools.com
Lee Day, MHS students O-Z	lday@middletowncityschools.com
Sherry Gaston, Midd-State students	sgaston@middletowncityschools.com
Catie Wambaugh, MMS 8th grade	cwambaugh@middletowncityschools.com
Lisa Blue, MMS 7th grade	lblue@middletowncityschools.com
Amy Cerminaro, Highview 6th grade	acerminaro@middletowncityschools.com