

High School Verification Form for Concurrent Enrollment

Name

_____/_____
SSN

Is a high school Junior or Senior at _____ and is applying
(Please circle one)

for concurrent enrollment at Western Oklahoma State College and is enrolled in _____ hours
of high school curriculum. **(Please attach a copy of your high school class schedule.)**

Expected Date of High School Graduation: _____

Semester at Western Oklahoma State College: FALL SPRING SUMMER **(Please Circle One)**

This student is eligible to satisfy curricular requirements for high school graduation and for college admission no later than the spring of his/her senior year. Attached is an official copy of the student's high school transcript with GPA and ACT and /or SAT scores.

(Signature of Principal)

(Date)

I recommend this student for concurrent enrollment at Western Oklahoma State College.

(Signature of Counselor)

(Date)

Parental permission is given to the student to concurrently enroll in courses at Western Oklahoma State College.

(Signature of Parent/Legal Guardian)

(Date)

As a concurrent student, I understand that, during this provisional enrollment period, I must achieve a grade point average of 2.0 or above on a 4.0 scale to be considered in good academic standing and be eligible for subsequent college enrollment. I also authorize the release of my college records to my high school principal/counselor while I am enrolled as a concurrent student.

(Signature of Student)

(Date)

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