



CONCURRENT ENROLLMENT RELEASE FORM

TO: Vice President for Instructional Services
Randolph Community College
Post Office Box 1009
Asheboro, NC 27204-1009

FROM: _____
(Name of Principal – PRINTED)

(School)

DATE: _____

In accordance with the rules, regulations, and policies of the State Board of Education, local board of education, and Randolph Community College relative to the concurrent admission of selected high school students 16 years old or older into curriculum and/or continuing education programs , I certify that:

(PRINTED NAME OF STUDENT)

is enrolled in high school courses for at least one-half of a full-time schedule and is making appropriate progress toward graduation. Furthermore, I recommend this student to enroll in the following course:

(PRINTED TITLE OF COURSE)

(COURSE NUMBER)

SIGNATURE OF PRINCIPAL

SIGNATURE OF STUDENT

FOR RCC USE ONLY:

SIGNATURE OF APPROVING OFFICIAL

DATE