



## CONCURRENT ENROLLMENT RELEASE FORM

**TO:** Vice President for Instructional Services  
Randolph Community College  
P.O. 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)

Birth date: (day/month/year) - \_\_\_\_\_

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

Effective Date: School Year 20\_\_ - 20\_\_, fall/ spring/ summer

**FOR RCC USE ONLY:**

\_\_\_\_\_

\_\_\_\_\_