



Dual Credit and Concurrent Enrollment Verification Form

Student Name: _____ Term: _____

High School: _____ JC Student ID #: _____

The above-referenced student is requesting to take the following course(s) for college credit. Please indicate if the student will receive high school credit from your institution or college credit only from Jacksonville College.

Course and Section:

- | | | | |
|-------|-----|---|--|
| _____ | ___ | <input type="checkbox"/> High School and College Credit | <input type="checkbox"/> College Credit Only |
| _____ | ___ | <input type="checkbox"/> High School and College Credit | <input type="checkbox"/> College Credit Only |
| _____ | ___ | <input type="checkbox"/> High School and College Credit | <input type="checkbox"/> College Credit Only |
| _____ | ___ | <input type="checkbox"/> High School and College Credit | <input type="checkbox"/> College Credit Only |

Signature of High School Official

Date

Signature of Student

Date