Nondegree High School Enrollment Supplemental Form

Last Name	First Name		Middle Initial
Cell Phone			
Please text me u	pdates about Penn State Admission	ns, including dual enrolli	ment
Enrollment Request: Spring	Summer Fall	Year	
Campus Location			
High School		Year of Graduation	
Counselor Name	Counselor E	mail	
Please indicate the course(s) in	which you would like to enroll:		
Schedule Number	Course Name/Abbreviation		Section
Schedule Number	Course Name/Abbreviation		Section
* Dates for course drop and add p	eriods can be found on the Academ	nic Calendar at https://r	egistrar.psu.edu
STUDENT			
high school named above at any ti University, including my professor at any time. I also understand that enrollment and withdrawing from	se any information, including grade me during the enrollment period. I , to discuss course progress with hi t I will be expected to adhere to all a course. I have been advised that ion as determined by the Universit	I also authorize represerigh school officials and/ostudent and academic partification in the content of the con	ntatives from the or my parent/guardian policies related to dual
Student Signature		Date	
PARENT/GUARDIAN			
the course(s) stated above. I unde Further, I understand that my child University, including those policies withdraws, I will be responsible fo Parent/Guardian	Nondegree High School Enrollmen rstand that transportation to and f d will be expected to adhere to all strelated to withdrawing from a cour the cost of tuition as determined	rom the University will is student and academic purse. I have been advise by the University.	not be provided. olicies of the
Signature		Date	