LEE COLLEGE
DUAL ENROLLMENT SPECIAL APPROVAL FORM

Student’s Name ____________________________________________

Last                      First                      Middle

Name of High School __________________________ Grade  □ 9  □ 10  □ 11  □ 12

Semester   □ Fall ________ □ Spring ________ □ Summer ________

TO BE COMPLETED BY HIGH SCHOOL

According to the rules of the Texas Higher Education Coordinating Board (THECB), the
permission of the high school PRINCIPAL and the college’s Vice President of Learning (or
designee) is required for either of the following (select any that apply):

_____ I. Student taking more than 2 courses per semester

_____ II. Student classified less than a high school junior

Dual enrollment students must comply with all applicable Texas Success Initiative policies
(college readiness assessment) and all course prerequisites as stated in the Lee College catalog.

TO BE COMPLETED BY DUAL CREDIT COORDINATOR

This student has demonstrated qualifying academic performances in the following areas (see
advising worksheet attachment for details):

□ SAT scores                      □ Qualifying Accuplacer Scores
□ ACT scores                      □ Other (please describe) ____________

Print Name (High School Principal)  Signature  Date

Print Name (College Official)        Signature  Date

Three Copies: (White) Lee College Admissions Office   (Yellow) High School Copy   (Pink) Student Copy