HIGH SCHOOL DUAL ENROLLMENT
SCHOOL AUTHORIZATION FORM

This form must be submitted each semester.

APPLICANTS
Please complete the boxed portion of this form and give to your high school/secondary school guidance counselor or principal.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name</th>
<th>Suffix</th>
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Cell Phone Number (Including Area Code)

I authorize Gannon University to contact me via text or smart message (SMS) at the cell phone number provided.

E-mail Address

Applying For (Check One)
- Fall 20____ Term
- Spring 20____ Term
- Summer 20____ Term

Gannon University course(s) in which you would like to enroll:

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Section</th>
<th>Course Name</th>
<th>Instructor</th>
<th>Days</th>
<th>Times</th>
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Alternate Courses
Please choose alternate sections for the particular course or courses you want.
If you are more focused on a particular time or days, please provide alternate courses taking place at those times and days.

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HIGH SCHOOL/SECONDARY SCHOOL GUIDANCE COUNSELOR OR PRINCIPALS
We appreciate your cooperation in providing the following information.

Overall GPA: _______ SAT/ACT: _______

Indicate your specific recommendation of this student for High School Dual Enrollment at Gannon University:
- recommended highly
- recommended with reservation
- recommended
- not recommended

Please feel free to use the section below for any comments on the above student.

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

I am aware and approve of the above student enrolling at Gannon University as a Dual Enrollee. Official High School Transcripts are included with the High School Dual Enrollment Application.

School Official Name (Please print) _______________________________ Title _______________________________

Telephone Number (Including extension) ___________________________ E-mail Address _______________________

School Official Signature _______________________________ Date _______________________________