



ALL PAGES MUST BE COMPLETED AND SIGNED

Page 2: To be completed by prospective student and guardian



Options for Enrollment in College Credit Plus Effective May 10, 2021

Ohio Revised Code section 3365.06 provides two options for College Credit Plus enrollment. Based on the order in which the options are listed within the statute, these are commonly referred to as "Option A" and "Option B." This summary sheet describes the two options available for College Credit Plus enrollment, payment, and credit earned.

College Credit Plus (CCP) "Option A":

A student can choose to self-pay for tuition and costs of all textbooks, materials, and fees associated with a course under Option A.

- The student must meet the CCP eligibility and college admission requirements and choose to take courses that are allowable under CCP.
A student must choose this option before the college's census date (usually 14 days after the start of term) by doing the following:
Student must notify the high school of the choice of Option A and the choice of receiving both high school and college credits or only college credit.
The credit received will be recorded on both the high school and college transcripts or college transcript only.
Student must notify the college to arrange for payment.
Student is not able to change options after the census date.
Student is billed directly by the college at the standard tuition rate, fees, and costs of textbooks.

\*Under no circumstances are sectarian or remedial courses eligible for CCP Option A or B.1

1 If a student chooses to self-pay for college courses outside of the College Credit Plus program (e.g., to take a sectarian course), the decisions pertaining to awarding credit are between the student, the secondary school, and the college. A student pursuing such options should be mindful that the student is not afforded the rights and protections afforded to students under the College Credit Plus program. May 2021

\*I plan to participate in the College Credit Plus program as: [ ] Option A OR [ ] Option B

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

continued

When application is completed, please have your Guidance Counselor send with High School Transcript to Ciara Small @ csmall@rio.edu

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**Page 3: To be completed by prospective student and guardian**



**PERMISSION SLIP**

This permission slip must be completed and signed by the student and his or her parent or guardian in order for the student to enroll in college courses under the College Credit Plus program.

A student eligible to participate in College Credit Plus and admitted to a college or university will enroll in actual college courses, which may include "mature subject matter" as defined in Ohio Revised Code 3365.035.

**PLEASE TYPE OR PRINT:**

We \_\_\_\_\_ (Student Name) and \_\_\_\_\_ (Parent Name) hereby understand that by enrolling in College Credit Plus courses:

- Content may include mature subject matter that will not be modified based upon College Credit Plus enrollee participation regardless of where course instruction occurs; and
- State law requires this signed form be submitted in the student's application to the college or university following that college or university's instructions for submission of application materials.

The signatures below indicate permission is granted to participate in College Credit Plus. It is the parent's or guardian's responsibility to be aware of and monitor the student's enrollment based on information provided by the college.

**Student Information – PLEASE TYPE OR PRINT:**

Student Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of High School (or homeschooled): \_\_\_\_\_

**Parent Information – PLEASE TYPE OR PRINT:**

Parent Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**RETURN THIS COMPLETED FORM TO THE COLLEGE OR UNIVERSITY TO WHICH THE STUDENT IS APPLYING.**

*continued*

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**Page 4: To be completed by High School Guidance Counselor**

**Student Eligibility Information**

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**Student Information:**

Student Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Student SSID: \_\_\_\_\_ Student Current Cumulative GPA: \_\_\_\_\_

Has the Student Completed a Letter of Intent?:  YES or  NO

Has the Student Completed the High School CCP Counseling Session?:  YES or  NO

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**School information:**

High School Name: \_\_\_\_\_

Guidance Counselor Name: \_\_\_\_\_

Counselor Email: \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

School Phone Number: \_\_\_\_\_ School Fax Number: \_\_\_\_\_

Guidance Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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