

NOTE: Students will not be registered until this form with all required signatures is returned to Lakeland. Please check course availability at lakelandcc.edu/schedule before submitting your form and have alternate times selected in case your first choices are filled at the time of registration. Registration is on a first-come, first-served basis.

Student Name _____ Phone Number _____ LID _____

High School _____ Term of attendance: Summer _____ Fall _____ Spring _____

Lakeland Course Dept. and Course No. (ex. ENGL 1110)	High School Requirement Subject Area (ex. Math, Social Studies, Elective)	Preferred Schedule			
		CRN	Day	Time	Credit Hours

High School Section: The above student has submitted a Letter of Intent for the school year _____ and has permission to attend Lakeland Community College under the CCP program. Yes No

To ensure student does not exceed their credit limit, calculate the number of eligible credits below:



This student: Is within the 30 credit hour limit for the academic year.
 Is over the 30 credit hour limit for the academic year. The student and parent have been notified that they will be financially responsible for any course that puts them over the limit.

Guidance Counselor Signature _____ Date _____

Student Financial Responsibility: A school district may seek reimbursement from students under the following two circumstances:
 1) If the student receives a failing grade at the end of the college course; or 2) If the student withdraws from or drops the college course subsequent to the 14th calendar day of the term, unless the student is identified as being economically disadvantaged in accordance with Ohio Administrative Code 3333-1-65.6(B)(2). If a student exceeds the 30 credit hour limit, the student/parent will be responsible for tuition, fees, books and materials for any course that puts them over the limit. Students exceeding 30 credit hours will be charged tuition based on their county of residence.

Parent/Guardian Signature _____ Date _____