

Miami-Dade County Public Schools Credit Certification For Adult High School Co-enrollment

Directions: This form must be completed for any student in a senior high school program who wishes to complete a course in the Adult High School Co-enrollment Program for credit toward a diploma in the senior high school program.

PLEASE PRINT NEATLY			
Student Name:		Date:	
Last	First	Middle	
Grade - Section:		Student I.D. Number:	
Authorized courses will be used to dropout prevention where the stu Education course. Retaking of any (April to April) year, including su only for the session selected.	dent is not on schedule course to improve GPA	to graduate with their s not permitted. A max	cohort group without the Adul imum of four courses per WDIS
Category: Credit Recovery 🗌 Di	opout Prevention		
Session: 🗌 (April - July) 🗌 (A	ugust -December) 🔲 (.	lanuary -April) 🗌 (Sum	nmer School)
COURSE NUMBER*	CC	OURSE TITLE	CREDIT
Name of Adult Center:		Location Number:	
*If more than one course is neede than four courses per WDIS (Apri			id request. Note that no more
Courses taken through Adult High in adult education classes is conti program. Failure to do so will resu be granted upon successful comp	ngent upon continued a It in the immediate with	acceptable behavior and advantage of the second sec	d attendance in the day school education course(s). Credit will
Name of Home Sc	hool	Home School Location Number	
Student's Signatur	e	Parent's Signature	
Counselor's Signat	ure	Student Service	Chairperson's Signature
	Principal's or Desi	gnee's Signature	_
I verify the course listed does not enrollment and that the student of of discussive behavior. "Usbituel	loes not have a pattern	of excessive absenteeis	sm, habitual truancy or history

of disruptive behavior. "Habitual truant" means a student has 15 unexcused absences within 90 calendar days. I also verify that this student is taking this course for credit recovery and not to improve his or her GPA.

Counselor's