Tuition and Textbooks

Section to Be Completed by HCS Guidance Counselor

Fall Semester Spring Semester
(Circle One)

Courses for Which the District Will Pay	Courses for Which the Student/Parent Will Pay

_____ _____
Guidance Counselor Signature Date

Section to Be Completed by Student and Parent

I,_____, have read and do hereby agree to the conditions and requirements for taking dual-enrollment courses for the_____semester.

_____ _____
Student Signature Date

_____ _____
Parent Signature Date