

Postsecondary Enrollment Options Notice of Student Registration Form 2025-26

Instructions: Complete an enrollment form for each instructional term and postsecondary institution (PSI) the student attends. Once Sections 1 and 2 are completely filled out, the next step is to work with the enrolling postsecondary institution to complete Section 3. Note: Only postsecondary institutions submit this form to the Minnesota Department of Education (MDE).

MDE College Student ID Number: Sar	ne as s	Star ID	- Ya M	DS7 Can	01018
1. Student and Parent/Guardian Comp		Section		if You're	a Cur
	Male 🔵	Female Unre	eported	1	PSEO
Student Name (Last, First, M.I.)	`			Birthdate (MM	M/DD/YYYY
Address	City		ZIP Code	Phone	
School Callege You are Plan	ing				
Postsecondary (stitution This Term 10 (Parent/G	uardian Name	Address (if	different from s	tudent)
Public School Students: Minnesota Statute	s 2024, section 124	D.09, subdivision 7,	to assist the di	strict in plannin	g a pupil
must inform the district by October 30 or N	Nay 30 of each year	the pupil's intent to	enroll in posts	secondary cours	es during
the following academic term. A pupil is bou					
in form to Guidh Bate I/we noti	fied the district the	intent to enroll in PS	SEO, either sem	ester, school ye	ar 2025-26.
All Students: Minnesota Statutes 2024, sec					
statement indicating they have received Po	stsecondary Enroll	ment Options (PSEO) information (i	ncluding transp	ortation
reimbursement for qualified students); are	aware counseling s	ervices are available	e; understand P	SEO course resp	onsibilities,
We have received the information required un enrolling in postsecondary courses.	ider Minnesota Statu	tes 2024, Section 124	D.09, and are av	ware the student	above is
emoning in postsecondary courses.					
My signature(s) below indicates I/we are aw	vare that if I/we have	e not notified the enro	lling district by M	lay 30, 2025 or C	ctober 30,
2025, and the enrolling district has not waived t	the deadline, I/we ma	y be responsible for	the postsecon	dary costs.	
Student Signature		Student Email			
Parent/Guardian Circuture (if and	40)				
Parent/Guardian Signature (if student is unde	rage 18)	Date			
2. To be Completed by Secondary/N	Nonpublic/Home	School			
		lic Mome Schoo	'O		
Secondary/Nonpublic/Home School Name	School T	ype (Select one)	Pu	blic School SSID	*Number
	(X) D				
Attending Public School District Name	Attending Publ	c School District Nu	mber (xxxx-xx)	122	
Student grade level during the 2025-26 sch	i ool year . (Select or	ne): Grade 10 🔘 🤆	Grade 11 🔘 G	irade 12	
Eligibility Note: High school graduates are n		•	•	_	
Students may not enroll in PSEO courses in ac	ddition to a full high	school class load. Stu	dents must also	give up one per	iod in
their high school day. Does this student have				day? Yes (No
ls the above student eligible for program ap				No 🔘	
My signature certifies the student in Section term, and information in Section 2 is accura	n 1 meets the eligib	ility requirements, p	pages 3-4, for P	SEO participation	on this
term, and information in Section 2 is accura school district of intent to enroll in postsecc	nte anu applicable. Ondary by May 30 o	r October 30 for PS	udent notified : FO enrollment	the enrolling pu during the follo	DIIC- wing
academic term, or the public-school district	has waived the de	adline requirements	i.	warming the folic	, ** II 'B
Secondary School Contact Name Contact	Signature	Email	Phone	e Da	te