# 2026-2027 Conditional Concurrent Enrollment Contract

*(Students with a GPA between 2.5 and 3.0 and wanting to enroll in a non-general education course)*

I understand that I do not currently meet the standard requirements for Concurrent Enrollment and have been approved to enroll on a conditional basis. I agree to participate in this Conditional Concurrent Enrollment Contract with my Concurrent Enrollment advisor as named below for the duration of this contract and will work diligently to earn good academic standing.

Student Name _____ Date _____

Student I.D. _____ Course GPA _____

Term and Year of Academic Probation _____

**College Course Requested:**

College _____ Course _____

Student Mentor (to be communicated with weekly) _____

**In order to earn good academic standing, I understand that I am REQUIRED to do the following:**

☐ Earn at least a _____ GPA each term for the duration of this contract.

☐ Communicate with my Student Mentor weekly.

☐ Communicate with my Concurrent Enrollment advisor monthly.

☐ Enrollment limited to _____

☐ Additional Requirements: _____

☐ Additional Requirements: _____

*I accept the conditions outlined in this contract with the understanding that if I fail to meet the requirements, I will be pulled from the Concurrent Enrollment program.*

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Concurrent Enrollment Coordinator Signature _____ Date _____

District Concurrent Director Signature (as applicable) _____ Date _____