

Processed by _____ Date _____

Fall 20____ Spr 20____ Sum 20____

PLEASE PRINT AND USE INK.

STUDENT'S NAME _____
LAST FIRST MIDDLE

MARIN ID M00 _____ **AGE** _____ **EMAIL** _____ **CURRENT GPA** _____

ADULT EDUCATION SCHOOL _____ **GRADUATION DATE** _____
MONTH / DATE / YEAR

COLLEGE CREDIT APPROVED COURSES: Concurrently enrolled students are restricted from enrolling in basic skills classes (classes numbered below 100 that are not vocational). It is the student's responsibility to meet and provide proof of prerequisite (as listed in the Schedule of Classes and College Catalog) for the following course(s).

COLLEGE CREDIT APPROVED COURSES FOR: Fall 20____ Spr 20____ Sum 20____

COURSE REFERENCE NUMBER	COURSE & NUMBER	UNITS

Student Signature _____ **DATE:** _____

Adult Ed School Principal or Official Designee (Required) _____ **DATE:** _____

College of Marin Counselor _____ **DATE:** _____