

STUDENT LAST NAME

FIRST NAME

EDISON STUDENT ID

HIGH SCHOOL

Registration forms may be submitted in person at any campus (Student Affairs) or via email to CCP@edisonohio.edu.
 Search for courses online at <https://myescc.edisonohio.edu/Student/Courses>

PLEASE USE A SEPARATE FORM FOR EACH SEMESTER.
 Course, number, section, and term must be indicated.

Ex	Course	Number	Section	Term	CH	Location	Day(s)	Start Time	End Time	Indicate semester				Option A Funding Initial this box if self-paying for course*
										Summer	Fall	Spring	Full Year	
	ENG	121S	001FS	2023FS	3	Mark selection	M/W	10:30 A.M.	11:45		X			
1						HS Piqua Eaton Online Grnvl Troy								
2						HS Piqua Eaton Online Grnvl Troy								
3						HS Piqua Eaton Online Grnvl Troy								
4						HS Piqua Eaton Online Grnvl Troy								
5						HS Piqua Eaton Online Grnvl Troy								

DROP CLASSES (complete this section to drop or withdraw from registered courses) – Deadlines can be found at www.edisonohio.edu/ccp.

1					
2					
3					
4					
5					

REGISTRATION ---- FOR OFFICE USE ONLY

By	Date
<p>CCP students must complete and submit this form for each semester of participation. School counselor authorization is required for all schedule changes. For registration assistance contact 937.778.8600 (Piqua), 937.381.1525 (Troy), 937.548.5546 (Greenville), & 937.683.8169 (Eaton).</p> <p>Ohio Administrative Code 3333.1.65.2: High schools must verify students are not taking more than 30 credit hours per academic year. To avoid going over 30 credit hour maximum, please calculate as follows:</p> <p>30 – (Secondary school units x 3) = ____ Total number of college credits available for the student to take this academic year</p> <p>Credit Tracking: Summer Semester credits ____ + Fall Semester credits ____ + Spring Semester Credits ____ = ____</p> <p>*Students will be billed by Edison State the current standard tuition rate for the entire course(s) which surpass the limit and/or are indicated as “Option A Funding” (self-pay).</p>	

By signing below, I verify that I possess the necessary social and emotional maturity to participate in the CCP program AND that I am ready to accept the responsibility and independence that a college classroom demands. I understand that I may be financially responsible to the school district for all associated costs related to any course withdrawn or not successfully completed. I understand that if I elect Option A Funding or exceed state-provided funding, I/my parents will be billed by Edison State the current standard tuition rate for the entire course(s) which surpass the limit. I agree to adhere to Edison State’s Student Code of Conduct, academic and general college policies outlined in the Student Handbook, my district’s probation and dismissal policies, as well as all CCP State Legislation.

Student Signature

Date

I have advised this student of the responsibilities involved with the participation in the CCP program. I acknowledge that I have received the student’s Letter of Intent and have discussed with the student academic eligibility and high school graduation requirements. I have verified the student is within annual credit hour limit and have noted any courses exceeding this limit in the comment section. I authorize this student to register or drop the courses indicated on this form.

School Counselor Signature

Date